

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 Filer ID (Ethics Commission Filers)	2 Total pages filed: 94				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received REC'D JUL 14 2015 USE @ 3:04 pm Date Hand Delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged </div>			
	Sergio		J				
Valdez							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE						
<input checked="" type="checkbox"/> Change of Address	P.O. Box 456 Edinburg, Texas 78540						
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(956)	292-7780					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	Noe						
Martinez		III					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE						
	5132 Shalom Drive Edinburg, TX 78539						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(956)	292-7780					
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	01	/ 01	/ 15		06	/ 30	/ 15
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	03	/ 01	/ 16	<input type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
	Judge: Hidalgo County Court at Law #7						

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME

Sergio J Valdez

15 Filer ID (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

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

\$ - 0 -

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

\$ 224,527.77

EXPENDITURE
TOTALS

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

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 35,468.13

CONTRIBUTION
BALANCE

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

\$ 188,723.66

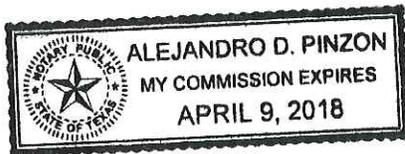
OUTSTANDING
LOAN TOTALS

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

\$ 76,650.00

18 AFFIDAVIT

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



AFFIX NOTARY STAMP / SEAL ABOVE

Sergio J Valdez
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said _____, this the 14 day of July, 2015, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME <i>Sergio J Valdez</i>		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ <i>224,527.77</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
3.	<input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$ <i>-0-</i>
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ <i>-0-</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ <i>31,183.31</i>
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>-0-</i>
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
8.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>4,284.82</i>
9.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>-0-</i>
10.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>-0-</i>

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 56
2 FILER NAME Sergio J. Valdez		3 Filer ID (Ethics Commission Filers)
4 Date 5-18-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jose A. Ramirez	7 Amount of contribution (\$) 1,000.⁰⁰
6 Contributor address; City; State; Zip Code 214 W. Cavost, Edinburg TX 78539		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Jose A. Ramirez		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 5-18-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Mauro Barreiro	Amount of contribution (\$) 1,500.⁰⁰
Contributor address; City; State; Zip Code 3403 W Alberta Rd, Edinburg TX 78539		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Mauro Barreiro		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 5-18-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Christopher Cavazos	Amount of contribution (\$) 2,500.⁰⁰
Contributor address; City; State; Zip Code 2102 W University Dr, Edinburg TX 78539		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office Christopher Cavazos		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-18-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Alfred T. Denham</i>	7 Amount of contribution (\$) <i>1,000 ⁰⁰/_{xx}</i>
6 Contributor address; City; State; Zip Code <i>3700 N. 10th St, McAllen TX 78501</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Alfred Denham</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-18-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Carlos Ortega</i>	Amount of contribution (\$) <i>2,500 ⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>16521 10th St, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Carlos Ortega P.C.</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-18-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ruben Ramirez</i>	Amount of contribution (\$) <i>2,500 ⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>520 W Pecan, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Ruben Ramirez</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-18-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Justino Garza</i>	7 Amount of contribution (\$) <i>1,500 ⁰⁰/_{xx}</i>
6 Contributor address; City; State; Zip Code <i>2223 Primrose Ave, McAllen TX 78504</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Justino (J.R.) Garza P.C.</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Librado Keno Vasquez</i>	Amount of contribution (\$) <i>1,000 ⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>3525 W Freddy Gonzalez, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of L. Keno Vasquez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-20-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Daniel Hernandez</i>	Amount of contribution (\$) <i>2,500 ⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>4841 S. Jackson, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Hernandez Law Firm, P.C.</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-19-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Juan Alvarez</i>	7 Amount of contribution (\$) <i>2,000 ^{OC}/_{KX}</i>
6 Contributor address; City; State; Zip Code <i>112 S. 12th Ave, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Alvarez & Canales PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Carlos R. Galvan</i>	Amount of contribution (\$) <i>2,500 ^{OC}/_{KX}</i>
Contributor address; City; State; Zip Code <i>3525 W Freddy Gonzalez, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Carlos R. Galvan</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Robert Fernandez</i>	Amount of contribution (\$) <i>2,500 ^{OC}/_{KX}</i>
Contributor address; City; State; Zip Code <i>215 W. Stubbs St, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Robert Fernandez</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-20-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Willie McAllen</i>	7 Amount of contribution (\$) <i>2,500^{oc}_{dx}</i>
	6 Contributor address; City; State; Zip Code <i>2102 University Dr, Edinburg TX 78539</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Willie McAllen</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-20-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Efrain Carrera</i>	Amount of contribution (\$) <i>1,000^{oc}_{dx}</i>
	Contributor address; City; State; Zip Code <i>617 S. 12th St, Edinburg TX 78539</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Efrain Carrera PC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Dan Worthington</i>	Amount of contribution (\$) <i>1,000^{oc}_{dx}</i>
	Contributor address; City; State; Zip Code <i>P.O. Drawer 3725, McAllen TX 78502</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Atlas Hall & Rodriguez LLP</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-20-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Scott McClain</i>	7 Amount of contribution (\$) <i>2,000⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>3900 P. 10th St, McAllen TX 78501</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>McAllen Mediation Center</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-20-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jose G. Gonzalez</i>	Amount of contribution (\$) <i>2,500⁰⁰</i>
Contributor address; City; State; Zip Code <i>2102 University Dr, Edinburg, TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Jose G Gonzalez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-20-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>John Tippit</i>	Amount of contribution (\$) <i>2,500⁰⁰</i>
Contributor address; City; State; Zip Code <i>820 W Nolana, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>The Tippit Law Firm LLP</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-21-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Oscar Rene Flores</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/_{xx}</i>
6 Contributor address; City; State; Zip Code <i>1308 S. 16th Ave, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Rene Flores</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-21-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jorge Muñoz</i>	Amount of contribution (\$) <i>2,500⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>210 W. Cano, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Jorge Muñoz PLLC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-21-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Teodulo L Lopez Jr</i>	Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>210 W Cano St, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>T Lopez Law Firm</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-15-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Michael D. Tuttle</i>	7 Amount of contribution (\$) <i>1,000⁰⁰/₀₀</i>
	6 Contributor address; City; State; Zip Code <i>4715 S Jackson, Edinburg TX 78539</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Michael D Tuttle PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-21-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Richard A. Cantu</i>	Amount of contribution (\$) <i>1,000⁰⁰/₀₀</i>
	Contributor address; City; State; Zip Code <i>P.O. Box 6149, McAllen TX 78502</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Richard A Cantu PC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-22-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Toribio Palacios</i>	Amount of contribution (\$) <i>2,500⁰⁰/₀₀</i>
	Contributor address; City; State; Zip Code <i>5526 P10th, McAllen TX 78504</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Garcia, Quintanilla, Palacios</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 5-22-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ David Flores	7 Amount of contribution (\$) 1,500 ⁰⁰ / ₁₀₀
6 Contributor address; City; State; Zip Code 118 E Cano, Edinburg TX 78539		
8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney	
10 Contributor's employer/law firm Law Office of Flores & Torres		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 5-22-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Armando M. Guerra	Amount of contribution (\$) 2,500 ⁰⁰ / ₁₀₀
Contributor address; City; State; Zip Code 113 N. 9 th Ave, Edinburg TX 78539		
Contributor's principal occupation Attorney	Contributor's job title Attorney	
Contributor's employer/law firm Armando Guerra & Assoc PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 5-22-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Michael R. DeLeon	Amount of contribution (\$) 2,500 ⁰⁰ / ₁₀₀
Contributor address; City; State; Zip Code 301 N. Main St, McAllen TX 78501		
Contributor's principal occupation Attorney	Contributor's job title Attorney	
Contributor's employer/law firm Law Office of Michael DeLeon		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <p style="text-align: center; font-size: 1.2em;">Sergio J Valdez</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="font-size: 1.2em;">5-22-15</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Pablo Garza</p>	7 Amount of contribution (\$) <p style="font-size: 1.5em;">2,500 ⁰⁰/₁₀₀</p>
6 Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">5429 N23rd St, McAllen TX 78504</p>		
8 Contributor's principal occupation <p style="font-size: 1.2em;">Attorney</p>		9 Contributor's job title <p style="font-size: 1.2em;">Attorney</p>
10 Contributor's employer/law firm <p style="font-size: 1.2em;">Garza & Gonzalez PLLC</p>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <p style="font-size: 1.2em;">5-22-15</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Mauro Barreiro</p>	Amount of contribution (\$) <p style="font-size: 1.5em;">1,000 ⁰⁰/₁₀₀</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">3603 W Alberts Rd, Edinburg TX 78539</p>		
Contributor's principal occupation <p style="font-size: 1.2em;">Attorney</p>		Contributor's job title <p style="font-size: 1.2em;">Attorney</p>
Contributor's employer/law firm <p style="font-size: 1.2em;">Law Office of Mauro Barreiro</p>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <p style="font-size: 1.2em;">5-20-15</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Eloy R. Garcia</p>	Amount of contribution (\$) <p style="font-size: 1.5em;">500 ⁰⁰/₁₀₀</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">118 E. Cano, Edinburg TX 78539</p>		
Contributor's principal occupation <p style="font-size: 1.2em;">Attorney</p>		Contributor's job title <p style="font-size: 1.2em;">Attorney</p>
Contributor's employer/law firm <p style="font-size: 1.2em;">Law Office Eloy Garcia</p>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-27-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rene A. Anzaldua</i>	7 Amount of contribution (\$) <i>1,000⁰⁰/₂₅</i>
	6 Contributor address; City; State; Zip Code <i>P.O. Box 2658, Edinburg TX 78540</i>	
8 Contributor's principal occupation <i>Bail Bond</i>		9 Contributor's job title <i>Bail Bond</i>
10 Contributor's employer/law firm <i>Anzaldua Bail Bond</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-26-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Carlos A. Garcia</i>	Amount of contribution (\$) <i>2,500⁰⁰/₂₅</i>
	Contributor address; City; State; Zip Code <i>1305 E. Griffin Pkwy, Mission TX 78572</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Carlos A. Garcia</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-30-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Octavio Castañeda</i>	Amount of contribution (\$) <i>2,500⁰⁰/₂₅</i>
	Contributor address; City; State; Zip Code <i>P.O. Box 5292, McAllen TX 78502</i>	
Contributor's principal occupation <i>Bail Bond</i>		Contributor's job title <i>Bail Bond</i>
Contributor's employer/law firm <i>Castaneda Bail Bond</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-26-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Albert Garcia</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/_{XX}</i>
	6 Contributor address; City; State; Zip Code <i>6900 N. 10th St, McAllen TX 78504</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Garcia & Martinez LLP</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-27-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Marcus Barrera</i>	Amount of contribution (\$) <i>2,500⁰⁰/_{XX}</i>
	Contributor address; City; State; Zip Code <i>10113 N 10th St, McAllen TX 78504</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Barrera Sanchez & Assoc PLLC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-27-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Alfredo Regalado</i>	Amount of contribution (\$) <i>1,000⁰⁰/_{XX}</i>
	Contributor address; City; State; Zip Code <i>P.O. Box 5217, McAllen TX 78502</i>	
Contributor's principal occupation <i>Bail Bond</i>		Contributor's job title <i>Bail Bond</i>
Contributor's employer/law firm <i>Regalado Bail Bond</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-27-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Patricia Love</i>	7 Amount of contribution (\$) <i>500^{cc}/_{chk}</i>
6 Contributor address; City; State; Zip Code <i>5135.10th Ave, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>	9 Contributor's job title <i>Attorney</i>	
10 Contributor's employer/law firm <i>Palacios Love Law PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-27-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>David Cazares</i>	Amount of contribution (\$) <i>500^{cc}/_{chk}</i>
Contributor address; City; State; Zip Code <i>1320 N 10th, McAllen TX 78501</i>		
Contributor's principal occupation <i>Attorney</i>	Contributor's job title <i>Attorney</i>	
Contributor's employer/law firm <i>Law Office of David Cazares</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-28-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jorge Salinas</i>	Amount of contribution (\$) <i>2,500^{cc}/_{chk}</i>
Contributor address; City; State; Zip Code <i>4417 N. McColl Rd, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>	Contributor's job title <i>Attorney</i>	
Contributor's employer/law firm <i>Law Office of Jorge Salinas PLLC</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Sergio J. Valdez		3 Filer ID (Ethics Commission Filers)
4 Date 5-29-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tillmin Welch	7 Amount of contribution (\$) 500 ⁰⁰/₂₅
	6 Contributor address; City; State; Zip Code 710 E El Cibola, Edinburg TX 78539	
8 Contributor's principal occupation Bail Bond		9 Contributor's job title Bail Bond
10 Contributor's employer/law firm Welch Bail Bonds		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 5-28-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Justino Garza	Amount of contribution (\$) 1,000 ⁰⁰/₂₅
	Contributor address; City; State; Zip Code 2223 Primrose Ave, McAllen TX 78504	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Justino (JR) Garza PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 5-28-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Nereida Lopez	Amount of contribution (\$) 2,500 ⁰⁰/₂₅
	Contributor address; City; State; Zip Code 1808 Ector, Edinburg TX 78539	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office Nereida Lopez		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Sergio J. Valdez		3 Filer ID (Ethics Commission Filers)
4 Date 5-29-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jay Bahkta	7 Amount of contribution (\$) 500 ⁰⁰/_{xx}
	6 Contributor address; City; State; Zip Code 205 N. Expy 77, Harlingen, TX 78550	
8 Contributor's principal occupation Entrepreneur		9 Contributor's job title manager
10 Contributor's employer/law firm Motel 6		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 5-29-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Rene A. Flores	Amount of contribution (\$) 1,000 ⁰⁰/_{xx}
	Contributor address; City; State; Zip Code 403 N. Conway Ave, Mission TX 78572	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Rene A Flores PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 5-29-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Roberto Jackson	Amount of contribution (\$) 500 ⁰⁰/_{xx}
	Contributor address; City; State; Zip Code 412 Palmview Dr, Palmview TX 78574	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Roberto Jackson		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-29-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Javier Morales</i>	7 Amount of contribution (\$) <i>1,000^{cc}_{xy}</i>
6 Contributor address; City; State; Zip Code <i>12403 N Bail Bond Dr, Edinburg TX 78542</i>		
8 Contributor's principal occupation <i>Bail Bond</i>		9 Contributor's job title <i>Bail Bond</i>
10 Contributor's employer/law firm <i>Morales Bail Bond</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-28-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>David Saenz</i>	Amount of contribution (\$) <i>500^{cc}_{xy}</i>
Contributor address; City; State; Zip Code <i>2001 W Polana, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office David Saenz</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-29-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Mario Davila</i>	Amount of contribution (\$) <i>2,500^{cc}_{xy}</i>
Contributor address; City; State; Zip Code <i>P.O. Box 5726, McAllen TX 78502</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Mario Davila PLLC</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-26-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Armando Marroquin</i>	7 Amount of contribution (\$) <i>2,500 ^{cc}/_{tx}</i>
6 Contributor address; City; State; Zip Code <i>421 S. 12th, McAllen TX 78501</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Marroquin Law Firm PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-29-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Dennis Ramirez</i>	Amount of contribution (\$) <i>2,500 ^{cc}/_{tx}</i>
Contributor address; City; State; Zip Code <i>111 Nth 5th, Donna TX 78537</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Dennis Ramirez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-29-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rafael De La Garza</i>	Amount of contribution (\$) <i>1,500 ^{cc}/_{tx}</i>
Contributor address; City; State; Zip Code <i>4943 Jackson Rd, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Rafael De La Garza PLLC</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-19-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ricardo Ramirez</i>	7 Amount of contribution (\$) <i>1,000⁰⁰/₂₄</i>
6 Contributor address; City; State; Zip Code <i>P.O. Box 1666, Pharr TX 78577</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Ricardo Ramirez</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-29-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Juan R Zamora</i>	Amount of contribution (\$) <i>1,500⁰⁰/₂₄</i>
Contributor address; City; State; Zip Code <i>140 Dove Ave, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Juan Zamora</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-29-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Richard D. Gonzalez</i>	Amount of contribution (\$) <i>1,250⁰⁰/₂₄</i>
Contributor address; City; State; Zip Code <i>5429 N 23rd, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Richard Gonzalez</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-29-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rubio Salinas</i>	7 Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
	6 Contributor address; City; State; Zip Code <i>1822 N. Dwyer Rd, Edinburg TX 78541</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Rubio Salinas</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-21-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Alejandro T. Martinez</i>	Amount of contribution (\$) <i>300⁰⁰/_{xx}</i>
	Contributor address; City; State; Zip Code <i>5000 N 23rd, McAllen TX 78504</i>	
Contributor's principal occupation <i>doctor</i>		Contributor's job title <i>doctor</i>
Contributor's employer/law firm <i>Martinez Family medicine</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-15-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>911 Pain Management</i>	Amount of contribution (\$) <i>2,000⁰⁰/_{xx}</i>
	Contributor address; City; State; Zip Code <i>5111 N. 10th St, McAllen TX 78504</i>	
Contributor's principal occupation Attorney <i>doctor</i>		Contributor's job title Attorney <i>doctor</i>
Contributor's employer/law firm <i>911 Pain Management</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-1-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Louis Patino</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/_{xx}</i>
6 Contributor address; City; State; Zip Code <i>1802 N 10th St, McAllen TX 78501</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Patino & Assoc. PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-1-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>OPEN MRI of McAllen</i>	Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>4900 N 10th, McAllen TX 78504</i>		
Contributor's principal occupation <i>medical</i>		Contributor's job title <i>medical</i>
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>6-1-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Melanie Lerma</i>	Amount of contribution (\$) <i>300⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>601 Gestel Circle, Edinburg TX 78539</i>		
Contributor's principal occupation <i>medical</i>		Contributor's job title <i>medical</i>
Contributor's employer/law firm <i>Medical Center</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-24-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Nashin Manohar</i>	7 Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
	6 Contributor address; City; State; Zip Code <i>4590 Professional Dr, Edinburg TX 78539</i>	
8 Contributor's principal occupation <i>medical</i>		9 Contributor's job title <i>medical</i>
10 Contributor's employer/law firm <i>Manohar medical Center</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>5-18-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Pablo Tagle II</i>	Amount of contribution (\$) <i>500⁰⁰/_{xx}</i>
	Contributor address; City; State; Zip Code <i>1211 Wisteria Ave, McAllen TX 78504</i>	
Contributor's principal occupation <i>medical</i>		Contributor's job title <i>medical</i>
Contributor's employer/law firm <i>Tagle M.D.</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-1-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Noe Cantu</i>	Amount of contribution (\$) <i>500⁰⁰/_{xx}</i>
	Contributor address; City; State; Zip Code <i>1506 Pecan Blvd, McAllen TX 78501</i>	
Contributor's principal occupation <i>Bail Bond</i>		Contributor's job title <i>Bail Bond</i>
Contributor's employer/law firm <i>Cantu Bail Bond</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-29-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Eduardo Ramirez</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/_{xx}</i>
6 Contributor address; City; State; Zip Code <i>505 N Britton, Rio Grande City, TX 78582</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Ramirez Law Firm PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-2-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ricardo Perez</i>	Amount of contribution (\$) <i>2,500⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>812 W Del Oro, Pharr, TX 78577</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Ricardo Perez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-2-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Carlos Guerra</i>	Amount of contribution (\$) <i>2,500⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>4201 N. McCall Rd, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Guerra Law Group PLLC</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-1-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Artemio De La Fuente</i>	7 Amount of contribution (\$) <i>2,500^{cc}_{dx}</i>
6 Contributor address; City; State; Zip Code <i>108 W Tongoil, McAllen TX 78501</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>De La Fuente Solis Law Firm</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-2-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Manuel Guerra III</i>	Amount of contribution (\$) <i>1,250^{cc}_{dx}</i>
Contributor address; City; State; Zip Code <i>320 W Pecan, McAllen TX 78501</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Manuel Guerra</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-1-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rafath Quraishi</i>	Amount of contribution (\$) <i>500^{cc}_{dx}</i>
Contributor address; City; State; Zip Code <i>4001 Lark Ave, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Medical Center</i>		Law firm of contributor's spouse (if any) <i>medical</i>
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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-29-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Carlos Macias</i>	7 Amount of contribution (\$) <i>500⁰⁰/₂₅</i>
6 Contributor address; City; State; Zip Code <i>615 Pecan Blvd, McAllen TX 78501</i>		
8 Contributor's principal occupation <i>A Horney</i>		9 Contributor's job title <i>A Horney</i>
10 Contributor's employer/law firm <i>Macias Law Firm</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-2-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ricardo Flores</i>	Amount of contribution (\$) <i>2,500⁰⁰/₂₅</i>
Contributor address; City; State; Zip Code <i>300 E Pecan, McAllen TX 78501</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>A Horney</i>
Contributor's employer/law firm <i>Law Office Ricardo Flores</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-22-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Daniel Vargas</i>	Amount of contribution (\$) <i>1,000⁰⁰/₂₅</i>
Contributor address; City; State; Zip Code <i>2205 12th, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>The Vargas Law Office</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-29-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Edna E. Cedillo</i>	7 Amount of contribution (\$) <i>500⁰⁰/₁₀₀</i>
	6 Contributor address; City; State; Zip Code <i>9095 10th, Edinburg TX 78539</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Edna Cedillo</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-26-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Reynaldo Merino</i>	Amount of contribution (\$) <i>1,000⁰⁰/₁₀₀</i>
	Contributor address; City; State; Zip Code <i>1012 Martin, McAllen TX 78504</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Reynaldo Merino</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-2-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Juan E. Gonzalez</i>	Amount of contribution (\$) <i>500⁰⁰/₁₀₀</i>
	Contributor address; City; State; Zip Code <i>3110 E Bus 83, Weslaco, TX 78596</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Juan E Gonzalez</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-2-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>McAllen Primary Care Clinic</i>	7 Amount of contribution (\$) <i>1,500⁰⁰/₂₅</i>
6 Contributor address; City; State; Zip Code <i>110 E Savannah, McAllen TX 78503</i>		
8 Contributor's principal occupation <i>medical</i>		9 Contributor's job title <i>Medical</i>
10 Contributor's employer/law firm <i>McAllen Primary Care Clinic</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-3-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Garza Carina</i>	Amount of contribution (\$) <i>2,500⁰⁰/₂₅</i>
Contributor address; City; State; Zip Code <i>P.O. Box 2228, McAllen TX 78502</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Garza Garcia PLLC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-3-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jody R Mask</i>	Amount of contribution (\$) <i>2,500⁰⁰/₂₅</i>
Contributor address; City; State; Zip Code <i>405 Quince Dr, McAllen TX 78501</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Garcia, Ochoa & Mask</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-3-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Eric Jarvis</i>	7 Amount of contribution (\$) <i>500⁰⁰/₀₀</i>
6 Contributor address; City; State; Zip Code <i>5804 N 23rd, McAllen TX 78504</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Jarvis Law Firm</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-3-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Patricia Oceana Olivarez</i>	Amount of contribution (\$) <i>1,000⁰⁰/₀₀</i>
Contributor address; City; State; Zip Code <i>9005 Stewart, Mission TX 78572</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Patricia Oceana Olivarez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-3-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Catarina Alvarado</i>	Amount of contribution (\$) <i>1,000⁰⁰/₀₀</i>
Contributor address; City; State; Zip Code <i>9005 Stewart, Mission TX 78572</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Catarina Alvarado</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-3-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Monica M Galvan</i>	7 Amount of contribution (\$) <i>2,500^{cc}_{dx}</i>
6 Contributor address; City; State; Zip Code <i>3525 W Freddy Gonzalez, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Monica Galvan</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-4-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Adolfo Alvarez</i>	Amount of contribution (\$) <i>1,000^{cc}_{dx}</i>
Contributor address; City; State; Zip Code <i>4409 N. McCall Rd, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Al Alvarez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-3-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Fabian Guerrero</i>	Amount of contribution (\$) <i>500^{cc}_{dx}</i>
Contributor address; City; State; Zip Code <i>511 W University, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Fabian Guerrero</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 6-4-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Daniel Reyes	7 Amount of contribution (\$) 1,000 ^{cc} / _{xx}
6 Contributor address; City; State; Zip Code 4016 N. 22 nd , McAllen TX 78504		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Daniel Reyes, Attorney at Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 6-4-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Abiel Flores	Amount of contribution (\$) 1,000 ^{cc} / _{xx}
Contributor address; City; State; Zip Code 10213 N 10 th St, McAllen TX 78504		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Abiel Flores PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 6-5-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Elida Garza	Amount of contribution (\$) 500 ^{cc} / _{xx}
Contributor address; City; State; Zip Code 4108 N 21 st St, McAllen TX 78504		
Contributor's principal occupation Bail Bond		Contributor's job title Bail Bond
Contributor's employer/law firm Garza Bail Bond		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Arturo Martinez</i>	7 Amount of contribution (\$)
	6 Contributor address; City; State; Zip Code <i>4145 Cage Blvd, Pharr TX 78577</i>	<i>1,000⁰⁰/_{xx}</i>
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Arturo Martinez</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-26-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Thomas G. Wayland</i>	Amount of contribution (\$)
	Contributor address; City; State; Zip Code <i>1630 N 10th St, McAllen TX 78501</i>	<i>1,000⁰⁰/_{xx}</i>
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Wayland Law Office</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-8-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Michael McGusk</i>	Amount of contribution (\$)
	Contributor address; City; State; Zip Code <i>4900 N 10th St, McAllen TX 78504</i>	<i>1,500⁰⁰/_{xx}</i>
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Kittleman Thomas PLLC</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-8-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rick Montalvo</i>	7 Amount of contribution (\$) <i>1,000 ⁰⁰/_{xx}</i>
	6 Contributor address; City; State; Zip Code <i>216 W Nolana Ave, McAllen TX 78504</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Rick Montalvo PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-6-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ernest Aliseda</i>	Amount of contribution (\$) <i>500 ⁰⁰/_{xx}</i>
	Contributor address; City; State; Zip Code <i>1519 Duke Ave, McAllen TX 78504</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Aliseda Mediations/Attorney</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-9-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Fernando Mancias</i>	Amount of contribution (\$) <i>1,000 ⁰⁰/_{xx}</i>
	Contributor address; City; State; Zip Code <i>900 Inspiration Dr, Pharr TX 78577</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Fernando Mancias</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Sergio J Valdez		3 Filer ID (Ethics Commission Filers)
4 Date 6-9-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Aizar Karam	7 Amount of contribution (\$) 1,000^{cc}/_{xx}
6 Contributor address; City; State; Zip Code 1722 Pecan, McAllen TX 78501		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Karam Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 6-9-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Michael Flannagan	Amount of contribution (\$) 2,500^{cc}/_{xx}
Contributor address; City; State; Zip Code 809 Chicago, McAllen TX 78501		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Michael Flannagan		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 6-9-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Oscar Vega	Amount of contribution (\$) 1,000^{cc}/_{xx}
Contributor address; City; State; Zip Code 2415 N 10th, McAllen TX 78504		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Oscar Vega Attorney At Law		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Roel (Robre) Flores</i>	7 Amount of contribution (\$)
<i>6-9-15</i>	6 Contributor address; City; State; Zip Code <i>3331 Ware Rd, McAllen TX 78501</i>	<i>200 ⁰⁰/_{xx}</i>
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Roel Robre Flores</i>		11 Law firm of contributor's spouse (if any)
12 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#: _____ <i>Leo Montalvo</i>	Amount of contribution (\$)
<i>6-10-15</i>	Contributor address; City; State; Zip Code <i>900 N Main, McAllen TX 78501</i>	<i>750 ⁰⁰/_{xx}</i>
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Leo Montalvo</i>		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#: _____ <i>Felipe Garcia Jr</i>	Amount of contribution (\$)
<i>6-10-15</i>	Contributor address; City; State; Zip Code <i>201 E University, Edinburg TX 78542</i>	<i>1,000 ⁰⁰/_{xx}</i>
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Felipe Garcia Jr</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-9-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Carlos Yzaguirre</i>	7 Amount of contribution (\$) <i>1,000^{cc}</i>
6 Contributor address; City; State; Zip Code <i>6521 N 10th, McAllen TX 78504</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>The Yzaguirre Law Firm</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-10-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ricardo Solis</i>	Amount of contribution (\$) <i>2,500^{cc}</i>
Contributor address; City; State; Zip Code <i>10005 Cynthia St, McAllen TX 78504</i>		
Contributor's principal occupation <i>Oilfield</i>		Contributor's job title <i>Oilfield</i>
Contributor's employer/law firm <i>Oilfield Services</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-10-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Costa Messa Restaurant</i>	Amount of contribution (\$) <i>1,000^{cc}</i>
Contributor address; City; State; Zip Code <i>1621 N. 1st, McAllen TX 78501</i>		
Contributor's principal occupation Attorney <i>Restaurant</i>		Contributor's job title Attorney <i>Restaurant</i>
Contributor's employer/law firm <i>Costa Messa Restaurant</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-12-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jaime Gonzalez Jr.</i>	7 Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
6 Contributor address; City; State; Zip Code <i>1500 Northgate Ln, McAllen TX 78504</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Jaime Gonzalez</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-11-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Francisco J. Garza</i>	Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>1300 N 10th, McAllen TX 78501</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office F. Garza</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-11-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Edmundo Ramirez</i>	Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
Contributor address; City; State; Zip Code <i>101 Chicago Ave, McAllen TX 78501</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Ellis, Korneke, Ramirez LLP</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-12-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>John Rodriguez</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/₁₀₀</i>
6 Contributor address; City; State; Zip Code <i>220 S Jackson Rd, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Offices Rodriguez & Rodriguez</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-11-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Pedro Armando Gutierrez</i>	Amount of contribution (\$) <i>2,500⁰⁰</i>
Contributor address; City; State; Zip Code <i>11435 N. Bryan, Mission TX 78573</i>		
Contributor's principal occupation <i>Construction</i>		Contributor's job title <i>Construction</i>
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>6-11-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>John Andrew Rigney</i>	Amount of contribution (\$) <i>1,000⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>5354 Seminary Rd, Edinburg TX 78541</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office John Rigney</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Sergio J Valdez		3 Filer ID (Ethics Commission Filers)
4 Date 6-12-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Librado Keno Vasquez	7 Amount of contribution (\$) 1,500 ^{cc} / _{rx}
6 Contributor address; City; State; Zip Code 3525w Freddy Gonzalez, Edinburg TX 78539		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office L. Keno Vasquez		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 6-10-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ricardo Villanueva	Amount of contribution (\$) 1,000 ^{cc} / _{rx}
Contributor address; City; State; Zip Code 418 E Dove, McAllen TX 78504		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Thornton Blechke... Guerra LC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 6-12-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ John Millin	Amount of contribution (\$) 2,500 ^{cc} / _{rx}
Contributor address; City; State; Zip Code 4900 N 10th St, McAllen TX 78504		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Millin & Millin PC		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-12-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Vicente Gonzalez</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/₁₀₀</i>
6 Contributor address; City; State; Zip Code <i>121 N 10th, McAllen TX 78501</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>V. Gonzalez & Assoc. PC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-12-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Javier Pena</i>	Amount of contribution (\$) <i>1,000⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>2035.10th, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>The Pena Law Firm LLC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-12-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ceil Peralez</i>	Amount of contribution (\$) <i>2,500⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>1416 Dove Ave, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Peralez Franz LLP</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-12-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Teadulo Lopez Jr.</i>	7 Amount of contribution (\$) <i>800⁰⁰/₀₀</i>
6 Contributor address; City; State; Zip Code <i>210 W Cano St, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>J Lopez Law Firm</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-11-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Michael D. Tuttle</i>	Amount of contribution (\$) <i>1,000⁰⁰/₀₀</i>
Contributor address; City; State; Zip Code <i>4715 S. Jackson Rd, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Michael Tuttle PLLC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-12-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Julian Rodriguez Jr</i>	Amount of contribution (\$) <i>500⁰⁰/₀₀</i>
Contributor address; City; State; Zip Code <i>10113 P 10th, McAllen TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Julian Rodriguez & Assoc PC</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-12-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Joe Richard Flores</i>	7 Amount of contribution (\$) <i>500⁰⁰/₁₀₀</i>
	6 Contributor address; City; State; Zip Code <i>4212 Marc Ave, Edinburg Tx 78539</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Joe Richard Flores</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-8-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Joe Brad Brock</i>	Amount of contribution (\$) <i>500⁰⁰/₁₀₀</i>
	Contributor address; City; State; Zip Code <i>5866 Staples St, Corpus Christi Tx 78413</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Joe Brad Brock</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-8-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>James P. Grissom</i>	Amount of contribution (\$) <i>500⁰⁰/₁₀₀</i>
	Contributor address; City; State; Zip Code	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office James Grissom</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-9-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Gregory Gowan</i>	7 Amount of contribution (\$) <i>250⁰⁰/₁₀₀</i>
6 Contributor address; City; State; Zip Code <i>555 N Carancahua, Corpus Christi TX 78401</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Gowan Elizondo LLP</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-8-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>William A. Dudley</i>	Amount of contribution (\$) <i>1,000⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>1126 3rd St, Corpus Christi, TX 78404</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office William Dudley</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-12-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Sergio Muñoz Jr</i>	Amount of contribution (\$) <i>1,200⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>1110 S Closter, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Sergio Muñoz Jr</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-15-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Roberto Garcia</i>	7 Amount of contribution (\$) <i>1,000⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>53015. McColl Rd, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Bobby Garcia PC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-12-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ricardo Garcia</i>	Amount of contribution (\$) <i>1,000⁰⁰</i>
Contributor address; City; State; Zip Code <i>820 South main, McAllen TX 78501</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Garcia Ochoa Mask</i>		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#: _____ <i>Sergio J Sanchez</i>	Amount of contribution (\$) <i>500⁰⁰</i>
Contributor address; City; State; Zip Code <i>4842 Jackson, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Sanchez Law Firm</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-11-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ryan C. Solis</i>	7 Amount of contribution (\$) <i>1,000 ^{cc}/_{kw}</i>
	6 Contributor address; City; State; Zip Code <i>3900 N 16th St, McAllen TX 78501</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Ryan Solis PLLC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-15-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Richard Lee Salinas</i>	Amount of contribution (\$) <i>2,000 ^{cc}/_{kw}</i>
	Contributor address; City; State; Zip Code <i>2011 N Conway, Mission TX 78572</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Ricardo Salinas</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-12-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rogelio Garza</i>	Amount of contribution (\$) <i>500 ^{cc}/_{kw}</i>
	Contributor address; City; State; Zip Code <i>P.O. Box 720074, McAllen TX 78504</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Rogelio Garza</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-2-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>LUCIA Regalado</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/₁₀₀</i>
6 Contributor address; City; State; Zip Code <i>201 Quail Ct, McAllen TX 78504</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Hidalgo County</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-11-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Domingo Rodriguez</i>	Amount of contribution (\$) <i>500⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>P.O. Box 882, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Bail Bond</i>		Contributor's job title <i>Bail Bond</i>
Contributor's employer/law firm <i>Rodriguez Bail Bond</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-12-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Daniel Santos</i>	Amount of contribution (\$) <i>1,000⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>4409 N McColl Rd, McAllen, TX 78504</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Daniel Santos</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <p style="text-align: center; font-size: 1.2em;">Sergio J Valdez</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="font-size: 1.2em;">6-16-15</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Val Peisen</p>	7 Amount of contribution (\$) <p style="font-size: 1.5em;">1,000^{cc}/_{xx}</p>
6 Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">112 W Jackson, McAllen TX 78501</p>		
8 Contributor's principal occupation <p style="font-size: 1.2em;">L&F Distributor</p>		9 Contributor's job title <p style="font-size: 1.2em;">CEO</p>
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <p style="font-size: 1.2em;">6-16-15</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Fernando Lopez</p>	Amount of contribution (\$) <p style="font-size: 1.5em;">500^{cc}/_{xx}</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">505 Angelita Dr, Weslaco TX 78596</p>		
Contributor's principal occupation <p style="font-size: 1.2em;">Attorney</p>		Contributor's job title <p style="font-size: 1.2em;">Attorney</p>
Contributor's employer/law firm <p style="font-size: 1.2em;">Your RGU Attorney LLC</p>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <p style="font-size: 1.2em;">6-16-15</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">David Torres</p>	Amount of contribution (\$) <p style="font-size: 1.5em;">1,000^{cc}/_{xx}</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">3901 W Schunior, Edinburg TX 78539</p>		
Contributor's principal occupation <p style="font-size: 1.2em;">Bail Bond</p>		Contributor's job title <p style="font-size: 1.2em;">Bail Bond</p>
Contributor's employer/law firm <p style="font-size: 1.2em;">Torres Bail Bond</p>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Sergio J Valdez		3 Filer ID (Ethics Commission Filers)
4 Date 6-16-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Humberto Tijerina	7 Amount of contribution (\$) 777. ⁷⁷/₁₀₀
	6 Contributor address; City; State; Zip Code 1200 S Col Rowe, McAllen TX 78501	
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Tijerina Legal Group PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 6-16-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Christopher Weaver	Amount of contribution (\$) 500 ⁰⁰/₁₀₀
	Contributor address; City; State; Zip Code 106 12th St, Edinburg TX 78539	
Contributor's principal occupation Valley Legal Solutions		Contributor's job title Legal Solution Specialist
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 6-17-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Rojelio Garza	Amount of contribution (\$) 1,000 ⁰⁰/₁₀₀
	Contributor address; City; State; Zip Code 4405 N McCall Rd, McAllen TX 78504	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office Rojelio Garza		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Sergio J. Valdez		3 Filer ID (Ethics Commission Filers)
4 Date 6-16-15	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Brian Loncar	7 Amount of contribution (\$) 1,000⁰⁰/₂₅
6 Contributor address; City; State; Zip Code 424 Cesar Chavez, Dallas TX 75201		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Car Wreck Masters PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 6-17-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Joe Garcia	Amount of contribution (\$) 2,500⁰⁰/₂₅
Contributor address; City; State; Zip Code 4401 N McColl Rd, McAllen TX 78504		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Garcia & Villarreal LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 6-16-15	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Cynthia Contreras Gutierrez	Amount of contribution (\$) 2,500⁰⁰/₂₅
Contributor address; City; State; Zip Code 16113 N 10th St, McAllen TX 78504		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Contreras Gutierrez & Assoc.		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-19-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Francisco Rodriguez</i>	7 Amount of contribution (\$) <i>1,000⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>1111 Nolana Ave, McAllen TX 78504</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Francisco Rodriguez</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-18-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Melissa R. Montes</i>	Amount of contribution (\$) <i>250⁰⁰</i>
Contributor address; City; State; Zip Code <i>PO Box 721044, McAllen TX 78502</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Melissa Montes</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-18-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Everardo Abrego</i>	Amount of contribution (\$) <i>700⁰⁰</i>
Contributor address; City; State; Zip Code <i>944 Nolana, Pharr TX 78577</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Everardo Abrego</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-18-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Cesar Aguilar</i>	7 Amount of contribution (\$) <i>250⁰⁰₀₀</i>
6 Contributor address; City; State; Zip Code <i>1704 W 22nd, Mission TX 78572</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law firm of COA</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-17-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Trendz Construction LLC</i>	Amount of contribution (\$) <i>500⁰⁰₀₀</i>
Contributor address; City; State; Zip Code <i>2112 University Dr, Edinburg TX 78539</i>		
Contributor's principal occupation <i>Construction</i>		Contributor's job title <i>Construction</i>
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>6-8-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Gilberto Hinojosa</i>	Amount of contribution (\$) <i>1,000⁰⁰₀₀</i>
Contributor address; City; State; Zip Code <i>622 E St Charles, Brownsville TX 78520</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Gilberto Hinojosa PC</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-18-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Lucia Thompson</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/₁₀₀</i>
6 Contributor address; City; State; Zip Code <i>2724 W Canton Rd, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Palacios Garza Thompson</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-15-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ricardo Navarro</i>	Amount of contribution (\$) <i>500⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>701 E Harrison, Harlingen TX 78550</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Devon Navarro Rocha PC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-18-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Andrew Yoo</i>	Amount of contribution (\$) <i>1,000⁰⁰/₁₀₀</i>
Contributor address; City; State; Zip Code <i>3900 N Jackson, Pharr TX 78577</i>		
Contributor's principal occupation <i>Business Payment Systems</i>		Contributor's job title <i>Owner</i>
Contributor's employer/law firm <i>Business Payment Services</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-19-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Patricia Rigney</i>	7 Amount of contribution (\$) <i>500^{cc}</i>
6 Contributor address; City; State; Zip Code <i>135 Paseo Del Prado, Edinburg TX 78539</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office Patricia Rigney</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>El Toro Club #2</i>	Amount of contribution (\$) <i>1,000^{cc}</i>
Contributor address; City; State; Zip Code <i>2203 S 23rd St, McAllen TX 78503</i>		
Contributor's principal occupation <i>Night Club</i>		Contributor's job title <i>owner</i>
Contributor's employer/law firm <i>El Toro Club #2</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-18-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Fernando Saenz</i>	Amount of contribution (\$) <i>2,500^{cc}</i>
Contributor address; City; State; Zip Code <i>P.O. Box 2412, Elsa, TX 78503</i>		
Contributor's principal occupation <i>Construction</i>		Contributor's job title <i>owner</i>
Contributor's employer/law firm <i>Saenz Construction</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-15-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jose m Flores</i>	7 Amount of contribution (\$) <i>2,500</i>
	6 Contributor address; City; State; Zip Code <i>P.O. Box 310, Mission TX 78573</i>	
8 Contributor's principal occupation <i>Oilfield</i>		9 Contributor's job title <i>Owner</i>
10 Contributor's employer/law firm <i>Oilfield Services</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Teodulo Lopez Jr.</i>	Amount of contribution (\$) <i>700 ⁰⁰/₁₂</i>
	Contributor address; City; State; Zip Code <i>13926 N 35th, McAllen TX 78504</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>T. Lopez Law Firm</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-20-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Lawrence Esparza</i>	Amount of contribution (\$) <i>200 ⁰⁰/₁₂</i>
	Contributor address; City; State; Zip Code <i>208 Ben Hogan Ave, McAllen TX 78504</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Public Defender Office</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-20-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Mark Edward Wilkins</i>	7 Amount of contribution (\$) <i>1,000^{cc}</i>
	6 Contributor address; City; State; Zip Code <i>P.O. Box 3609, McAllen TX 78502</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Wilkins Law Office</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-20-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Julian Ybarra</i>	Amount of contribution (\$) <i>1,000^{cc}</i>
	Contributor address; City; State; Zip Code <i>2800 Santa Ana, Mission TX 78572</i>	
Contributor's principal occupation <i>Wiggles - Rehab</i>		Contributor's job title <i>owner</i>
Contributor's employer/law firm <i>Wiggles Rehabilitation</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-20-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Oscar Lee Langoria Jr</i>	Amount of contribution (\$) <i>250^{cc}</i>
	Contributor address; City; State; Zip Code <i>P.O. Box 4224, Mission TX 78573</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Oscar Langoria</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-18-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Border Health PAC</i>	7 Amount of contribution (\$) <i>2,500⁰⁰/₁₀₀</i>
	6 Contributor address; City; State; Zip Code <i>612 W Polano, McAllen Tx 78504</i>	
8 Contributor's principal occupation <i>PAC - Health</i>		9 Contributor's job title <i>PAC</i>
10 Contributor's employer/law firm <i>PAC - Health</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Eloy Sepulveda</i>	Amount of contribution (\$) <i>1,500⁰⁰/₁₀₀</i>
	Contributor address; City; State; Zip Code <i>716 S. Texas Blvd, Weslaco, Tx 78596</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Eloy Sepulveda</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-19-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Sergio Muñoz Jr</i>	Amount of contribution (\$) <i>1,300⁰⁰/₁₀₀</i>
	Contributor address; City; State; Zip Code <i>1110 S. Closter, Edinburg Tx 78539</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office Sergio Muñoz Jr, PC</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <p style="text-align: center; font-size: 1.2em;">Sergio J Valdez</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="font-size: 1.2em;">6-12-15</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Eduardo Garza</p>	7 Amount of contribution (\$) <p style="font-size: 1.5em;">300⁰⁰/_{xx}</p>
	6 Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">964 E Los Ebanos, Brownsville TX 78520</p>	
8 Contributor's principal occupation <p style="font-size: 1.2em;">Attorney</p>		9 Contributor's job title <p style="font-size: 1.2em;">Attorney</p>
10 Contributor's employer/law firm <p style="font-size: 1.2em;">Esparza & Garza LLP</p>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <p style="font-size: 1.2em;">6-17-15</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Steve Gonzalez</p>	Amount of contribution (\$) <p style="font-size: 1.5em;">1,000⁰⁰/_{xx}</p>
	Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">1317 E Quebec, McAllen TX 78501</p>	
Contributor's principal occupation <p style="font-size: 1.2em;">Attorney</p>		Contributor's job title <p style="font-size: 1.2em;">Attorney</p>
Contributor's employer/law firm <p style="font-size: 1.2em;">Gonzalez Castillo LLP</p>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <p style="font-size: 1.2em;">6-23-15</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <p style="font-size: 1.2em;">Rubio Salinas</p>	Amount of contribution (\$) <p style="font-size: 1.5em;">1,500⁰⁰/_{xx}</p>
	Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">1822 N Depot Rd, Edinburg TX 78539</p>	
Contributor's principal occupation <p style="font-size: 1.2em;">Attorney</p>		Contributor's job title <p style="font-size: 1.2em;">Attorney</p>
Contributor's employer/law firm <p style="font-size: 1.2em;">Law Office Rubio Salinas</p>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Sergio J Valdez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-23-15</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Kevin O'Hawbn</i>	7 Amount of contribution (\$) <i>1,000⁰⁰/_{xx}</i>
	6 Contributor address; City; State; Zip Code <i>808 W Ave, Austin Tx 78701</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>O'Hawbn, McCollon, Denerath PC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>6-23-15</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Michael D. Tuttle</i>	Amount of contribution (\$) <i>500⁰⁰/_{xx}</i>
	Contributor address; City; State; Zip Code <i>4715 S. Jackson Rd, Edinburg</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Michael D. Tuttle</i>		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 (\$)
	Contributor address; City; State; Zip Code	
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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>Sergio J Valdez</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>N/A</u>	8 Amount of Contribution \$	9 In-kind contribution description
	7 Contributor address; City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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

PLEGGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B(J): <u>1</u>	
2 FILER NAME <u>Sergio J Valdez</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES		\$ <u>- 0 -</u>	
5 Date <u>N/A</u>	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$	9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Pledgor's principal occupation		11 Pledgor's job title	
12 Pledgor's employer/law firm		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$	In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$	In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor 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.			

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): 1
2 FILER NAME Sergio J Valdez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS N/A		\$
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution? Y N	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Lender's Principal Occupation		13 Lender's Job Title
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input type="checkbox"/> none		18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14	2 FILER NAME Sergio J Valdez	3 Filer ID (Ethics Commission Filers)
4 Date 5-19-15	5 Payee name Kumori	
6 Amount (\$) \$77.29	7 Payee address; City; State; Zip Code McAllen, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss Campaign
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 5-22-15	Payee name Olive Garden	
Amount (\$) \$66.64	Payee address; City; State; Zip Code 222 Expwy 83 McAllen TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss Campaign
	Candidate / Officeholder name Office sought Office held	
Date 5-22-15	Payee name Academy	
Amount (\$) \$832.79	Payee address; City; State; Zip Code Trenton Rd Edinburg TX 78539	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense door/raffle Prizes
	Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sergio J. Valdez	3 Filer ID (Ethics Commission Filers)
4 Date 5-25-15	5 Payee name Le Peep	
6 Amount (\$) \$42.16	7 Payee address; City; State; Zip Code 7700 N. 10th St. McAllen TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss Campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 5-26-15	Payee name La Jaiba	
Amount (\$) \$102.19	Payee address; City; State; Zip Code 600 Molana McAllen TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 5-27-15	Payee name La Jaiba	
Amount (\$) \$153.09	Payee address; City; State; Zip Code 600 Molana McAllen, TX 78501	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss Campaign
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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Sergio J Valdez		3 Filer ID (Ethics Commission Filers)	
4 Date 5-28-15		5 Payee name Stitch RGU Masters			
6 Amount (\$) \$473.05		7 Payee address; City; State; Zip Code 5401 N. 10th St McAllen TX 78504			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Embroidery & Printing of shirts for event (self) shirts	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5-29-15		Payee name La Jaiba			
Amount (\$) \$134.04		Payee address; City; State; Zip Code 600 Nolana McAllen, TX 78504			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss campaign	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5-31-15		Payee name Academy			
Amount (\$) \$288.44		Payee address; City; State; Zip Code Trenton Rd Edinburg, TX 78539			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door/Raffle Prizes and clothing/shirts for golf tournament	
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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Sergio J. Valdez</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>6-1-15</i>		5 Payee name <i>La Jaiba</i>			
6 Amount (\$) <i>\$181.52</i>		7 Payee address; City; State; Zip Code <i>600 Pokwa McAllen TX 78501</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>meeting to discuss Campaign</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>6-1-15</i>		Payee name <i>Academy</i>			
Amount (\$) <i>\$97.40</i>		Payee address; City; State; Zip Code <i>Trenton Road McAllen TX 78539</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Doo's/Raffle Pizzas for Golf Tournament</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>6-2-15</i>		Payee name <i>Blue Onion</i>			
Amount (\$) <i>\$135.78</i>		Payee address; City; State; Zip Code <i>925 Dove Ave. McAllen TX 78504</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>meeting to discuss Campaign</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Sergio J Valdez		3 Filer ID (Ethics Commission Filers)	
4 Date 6-4-15		5 Payee name Metro PCS			
6 Amount (\$) \$94.04		7 Payee address; City; State; Zip Code 2216 W. Trenton McAllen TX 78504			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead/Cell Phone		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase Campaign cellular phone.	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6-5-15		Payee name La Jaiba			
Amount (\$) \$561.79		Payee address; City; State; Zip Code 600 Molana McAllen TX 78504			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meetings with constituents and to discuss campaign golf event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6-6-15		Payee name Peppers			
Amount (\$) 304.78		Payee address; City; State; Zip Code 4620 N. 10th St McAllen TX 78504			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meetings with constituents and to discuss campaign golf event	
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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sergio J Valdez	3 Filer ID (Ethics Commission Filers)
----------------------------	--	---------------------------------------

4 Date 6-6-15	5 Payee name Peppers
-------------------------	--------------------------------

6 Amount (\$) \$198.79	7 Payee address; City; State; Zip Code 4620 N. 10th St. McAllen TX 78504
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss campaign event
------------------------------------	--	--

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

Date 6-7-15	Payee name Metro PCS
-----------------------	--------------------------------

Amount (\$) \$153.00	Payee address; City; State; Zip Code 501 Hwy 83 Donna, TX 78537
--------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Cell Phone	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense cellular phone monthly
-------------------------------	---	---

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

Date 6-7-15	Payee name Office Depot
-----------------------	-----------------------------------

Amount (\$) \$166.46	Payee address; City; State; Zip Code 5115 N. 10th St. McAllen TX 78504
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Color Toner for Printing Pamphlets
-------------------------------	---	---

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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Sergio J. Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>6-8-15</i>	5 Payee name <i>Chick-Fill A</i>	
6 Amount (\$) <i>\$53.15</i>	7 Payee address; City; State; Zip Code <i>Hwy 107 Edinburg, TX 78539</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>meeting to discuss campaign</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date <i>6-13-15</i>	Payee name <i>Academy</i>	
Amount (\$) <i>\$122.65</i>	Payee address; City; State; Zip Code <i>Trenton Rd Edinburg, TX 78539</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Door/Raffle Prizes for golf event</i>
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date <i>6-16-15</i>	Payee name <i>Stitch RGU Masters</i>	
Amount (\$) <i>\$548.02</i>	Payee address; City; State; Zip Code <i>5401 N. 10th St. McAllen TX 78504</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Embroidery & Printing of shirts for golf event</i>
	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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Sergio J. Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>6-16-15</i>	5 Payee name <i>La Jaiba</i>	
6 Amount (\$) <i>\$608.91</i>	7 Payee address; City; State; Zip Code <i>600 Nolana McAllen, TX 78504</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>meetings with constituents and campaign meetings for golf event</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date <i>6-17-15</i>	Payee name <i>Best Buy</i>
Amount (\$) <i>\$303.09</i>	Payee address; City; State; Zip Code <i>8012 N. 10th St McAllen TX 78504</i>
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>
	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Door/Raffle prizes for golf event</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date <i>6-17-15</i>	Payee name <i>Best Buy</i>
Amount (\$) <i>\$4,048.15</i>	Payee address; City; State; Zip Code <i>8012 N. 10th St. McAllen TX 78504</i>
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>
	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Door/Raffle prizes for golf event</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Sergio J Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>6-17-15</i>	5 Payee name <i>HD Supply</i>	
6 Amount (\$) <i>\$1,099.99</i>	7 Payee address; City; State; Zip Code <i>5411 Athol St Pharr, TX 78577</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Equipment/ Event Expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Generator for power at golf event</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name
Date <i>6-18-15</i>	Payee name <i>Best Buy</i>	
Amount (\$) <i>\$162.36</i>	Payee address; City; State; Zip Code <i>8012 N. 10th St McAllen TX 78504</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Raffle/Door Prize for golf event</i>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name
Date <i>6-18-15</i>	Payee name <i>Academy</i>	
Amount (\$) <i>\$2,032.10</i>	Payee address; City; State; Zip Code <i>Trenton Rd McAllen TX 78504</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Raffle/Door Prizes for golf event</i>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sergio J. Valdez	3 Filer ID (Ethics Commission Filers)
----------------------------	---	---------------------------------------

4 Date 6-19-15	5 Payee name Wal-Mart
--------------------------	---------------------------------

6 Amount (\$) \$90.91	7 Payee address; City; State; Zip Code 4101 S. McCall Rd Edinburg TX 78539
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sun screen / Bus spray for golf event
------------------------------------	--	--

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

Date 6-19-15	Payee name Joe's Tackle Shop
------------------------	--

Amount (\$) \$660.18	Payee address; City; State; Zip Code 1128 Lindbergs Ave McAllen TX 78501
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door/Raffle Prizes for golf event
-------------------------------	--	--

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

Date 6-19-15	Payee name Saltgrass
------------------------	--------------------------------

Amount (\$) \$263.00	Payee address; City; State; Zip Code 3000 W Expwy 83 McAllen TX 78501
--------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting to discuss golf event
-------------------------------	--	--

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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Sergio J Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>6-19-15</i>	5 Payee name <i>Aguilar Meat Market</i>	
6 Amount (\$) <i>\$546.96</i>	7 Payee address; City; State; Zip Code <i>3317 W. University Edinburg TX 78539</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage Event Expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>meat for golf event cook-out</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date <i>6-19-15</i>	Payee name <i>Print Works</i>	
Amount (\$) <i>\$112.00</i>	Payee address; City; State; Zip Code <i>1414 Pecan Blvd McAllen TX 78501</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Signs & H-Frames</i>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date <i>6-19-15</i>	Payee name <i>Best Buy</i>	
Amount (\$) <i>\$898.46</i>	Payee address; City; State; Zip Code <i>3400 W. Expressway 83 McAllen TX 78501</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Raffle/Door Prizes for golf event</i>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Sergio J Valdez</i>	3 Filer ID (Ethics Commission Filers)
-----------------------------------	---	--

4 Date <i>6-20-15</i>	5 Payee name <i>Annette Marie LC</i>
---------------------------------	--

6 Amount (\$) <i>\$1,250.24</i>	7 Payee address; City; State; Zip Code <i>2701 S. Ware Rd McAllen TX 78503</i>
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Breakfast at golf event</i>
---	---	---

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

Date <i>6-20-15</i>	Payee name <i>Palm View Golf Course</i>
------------------------	--

Amount (\$) <i>\$4,920.00</i>	Payee address; City; State; Zip Code <i>2701 S. Ware Rd McAllen TX 78504</i>
----------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Golf Course fee for golf event</i>
-------------------------------	---	--

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

Date <i>6-16-20</i>	Payee name <i>Valley Discount Golf, INC</i>
------------------------	--

Amount (\$) <i>\$3,788.63</i>	Payee address; City; State; Zip Code <i>2224 N. 10th St McAllen, TX 78504</i>
----------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Prizes for golf event</i>
-------------------------------	---	---

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sergio J Valdez	3 Filer ID (Ethics Commission Filers)
4 Date 5-18-15	5 Payee name Print Works	
6 Amount (\$) \$200.26	7 Payee address: City; State; Zip Code 1414 Pecan Blvd McAllen TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Golf event flyers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 6-23-15	Payee name U.S.P.S. (Edinburg Office)		
Amount (\$) 76.00	Payee address; City; State; Zip Code 410 S. Jackson Rd, Edinburg TX 78539		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Post Office Box Rental	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense P.O. Box Rental	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 6-26-15	Payee name Andy Ramirez		
Amount (\$)	Payee address; City; State; Zip Code 3824 N Gwin, Edinburg, Texas 78539		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense margarita machines for golf event	
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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Sergio J Valdez</i>	3 Filer ID (Ethics Commission Filers)	
4 Date <i>6-29-15</i>	5 Payee name <i>Carrera Communications</i>		
6 Amount (\$) <i>5,000⁰⁰/_{xx}</i>	7 Payee address; City; State; Zip Code <i>135 Paseo Del Prado, Edinburg TX 78539</i>		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Consulting Expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Campaign retainer for consultation on campaign</i>	
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 1	2 FILER NAME Sergio J Valdez	3 Filer ID (Ethics Commission Filers)
--	--	--

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS N/A	\$
---	----

5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
----------------------	---

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date	Payee name
------	------------

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

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

**PURCHASE OF INVESTMENTS
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3: 1

2 FILER NAME

Sergio J Valdez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

N/A

6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <i>9</i>	2 FILER NAME <i>Sergio J. Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1-8-15</i>	5 Payee name <i>Coffee Zone</i>	
6 Amount (\$) <i>\$ 87.01</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>1108 S. McCall Rd Edinburg, TX 78539</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	(b) Description <i>Campaign meeting/event</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>1-10-15</i>	Payee name <i>Salt</i>
Amount (\$) <i>\$142.90</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>210 N. Main St. McAllen, TX 78501</i>
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>
	(b) Description <i>meeting to discuss campaign/event</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held

Date <i>1-16-15</i>	Payee name
Amount (\$) <i>\$44.23</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Maria Mia Mexican Bistro San Antonio, Texas</i>
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>
	(b) Description <i>meeting to discuss campaign/event</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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
MADE FROM PERSONAL FUNDS**

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:		2 FILER NAME Sergio J. Valdez		3 Filer ID (Ethics Commission Filers)	
4 Date 1-17-15		5 Payee name Paesanos Ristorante			
6 Amount (\$) \$101.70 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 111 W. Crocket St. San Antonio, TX 78205			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description Campaign meetings <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

Date 1-18-15		Payee name Magnolia			
Amount (\$) \$127.83 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code San Antonio, TX 78205			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description Campaign meeting/ event <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

Date 1-27-15		Payee name La Pampa			
Amount (\$) 123.13 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 3300 N. McCall McAllen TX 78504			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description Campaign/event meeting <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Sergio J. Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1-28-15</i>	5 Payee name <i>Grimaldi's</i>	
6 Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$245.73</i>	7 Payee address; City; State; Zip Code <i>330 E. Basse Rd San Antonio, TX 78209</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	(b) Description <i>Campaign meeting</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>2-7-15</i>	Payee name <i>City Cate</i>	
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$46.82</i>	Payee address; City; State; Zip Code <i>2901 N. 10th St. McAllen TX 78501</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	(b) Description <i>Campaign/event meeting</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>2-20-15</i>	Payee name <i>House Wine</i>	
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$79.02</i>	Payee address; City; State; Zip Code <i>1117 W. US Hwy 83 McAllen TX 78501</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	(b) Description <i>Campaign/event mtg</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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 MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Sergio J. Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3-6-15</i>	5 Payee name <i>Pappadeaux</i>	
6 Amount (\$) <i>\$256.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>1610 W. Expwy 83 Pharr, TX 78577</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	(b) Description <i>Campaign / Event meetings</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>3-9-15</i>	Payee name <i>Il Forno</i>	
Amount (\$) <i>\$101.10</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>McAllen, Texas</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	(b) Description <i>Campaign / event meeting</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>3-10-15</i>	Payee name <i>Yokos</i>	
Amount (\$) <i>\$114.78</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>7001 N. 10th St. McAllen TX 78577</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food / Beverage</i>	(b) Description <i>Campaign meeting</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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 MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Sergio J. Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3-14-15</i>	5 Payee name <i>Saltgrass</i>	
6 Amount (\$) <i>\$61.66</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>3000 W. Expwy 83 McAllen TX 78501</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>	(b) Description <i>Campaign meeting</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>3-25-15</i>	Payee name <i>Home Depot</i>	
Amount (\$) <i>\$657.43</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>801 Trenton Rd McAllen, TX 78504</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Equipment/Related Expense</i>	(b) Description <i>Auger and ties</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>4-5-15</i>	Payee name <i>Academy</i>	
Amount (\$) <i>\$399.99</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Trenton Rd Edinburg, Texas</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Equipment/Related Expense</i>	(b) Description <i>Ice chests and ice packs and tie downs</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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 MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Sergio J. Valdez	3 Filer ID (Ethics Commission Filers)
---------------------------	---	---------------------------------------

4 Date 4-9-15	5 Payee name Pirates Landing
-------------------------	--

6 Amount (\$) 193.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 110 N. Garcia Port Isabel TX 78578
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description Campaign/event meeting <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
--------------------------	--	--

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

Date 4-14-15	Payee name Le Peep
------------------------	------------------------------

Amount (\$) \$95.18 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7700 N. 10th St. McAllen TX 78504
--	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description Event meeting <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

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

Date 4-29-15	Payee name Olive Garden
------------------------	-----------------------------------

Amount (\$) \$160.33 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 7812 N. 10th St. McAllen TX 78504
---	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description Cost event meeting <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	--

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 MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Sergio J. Valdez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>4-30-15</i>	5 Payee name <i>Republic of the Rio Grande</i>	
6 Amount (\$) <i>\$252.09</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>1411 S. 10th St. McAllen, TX 78501</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>	(b) Description <i>Campaign/Event meeting</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>5-4-15</i>	Payee name <i>GOLF HQ</i>	
Amount (\$) <i>\$290.11</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>2224 N. 10th St. McAllen TX 78501</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fundraising Expense</i>	(b) Description <i>Door/Raffle Prizes for golf event</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>5-5-15</i>	Payee name <i>Academy</i>	
Amount (\$) <i>\$324.74</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>Trenton Rd Edinburg, Texas 78539</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Ice chests for golf event</i> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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 MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Sergio J. Valdez	3 Filer ID (Ethics Commission Filers)
4 Date 5-5-15	5 Payee name Wallbangers	
6 Amount (\$) \$67.93 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8024 N. 10th St. McAllen TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description Campaign meeting <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 5-9-15	Payee name Yummies Bistro	
Amount (\$) 102.12 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 700 Padre Blvd S. Padre Island, TX 78597	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description Campaign meeting <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 5-10-15	Payee name Blue Onion	
Amount (\$) \$39.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 925 Dove Ave. McAllen, TX 78504	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description Campaign meeting <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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 MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 2 FILER NAME **Sergio J. Valdez** 3 Filer ID (Ethics Commission Filers)

4 Date **5-11-15** 5 Payee name **La Jaiba**

6 Amount (\$) **\$37.82** 7 Payee address; City; State; Zip Code
 Reimbursement from political contributions intended
**800 Nolana
McAllen TX 78501**

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) **Food/Beverage** (b) Description **Event meeting**
 Check if travel outside of Texas, complete Schedule T
 Check if Austin, TX, officeholder living expense

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

Date **5-15-15** Payee name **Kozy Kitchen**

Amount (\$) **\$73.34** Payee address; City; State; Zip Code
 Reimbursement from political contributions intended
Dallas, Texas

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Food/Beverage** (b) Description **Campaign meeting**
 Check if travel outside of Texas, complete Schedule T
 Check if Austin, TX, officeholder living expense

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

Date **5-16-15** Payee name **Saltgrass**

Amount (\$) **\$64.34** Payee address; City; State; Zip Code
 Reimbursement from political contributions intended
**3000 W Expwy 83
McAllen TX 78501**

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Food/Beverage** (b) Description **Event meeting**
 Check if travel outside of Texas, complete Schedule T
 Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H: 1	2 FILER NAME Sergio J Valdez	3 Filer ID (Ethics Commission Filers)
---------------------------------------	--	---------------------------------------

4 Date	5 Business name N/A
--------	-------------------------------

6 Amount (\$)	7 Business address; City; State; Zip Code
---------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date	Business name
------	---------------

Amount (\$)	Business address; City; State; Zip Code
-------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date	Business name
------	---------------

Amount (\$)	Business address; City; State; Zip Code
-------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1	2 FILER NAME Sergio J. Valdez	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name N/A	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: <u>1</u>
2 FILER NAME Sergio J. Valdez		3 Filer ID (Ethics Commission Filers)
4 Date	5 Name of person from whom amount is received N/A	8 Amount (\$)
	6 Address of person from whom amount is received; City; State; Zip Code	
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer		
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer		
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer		
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L: 1
3 Filer ID (Ethics Commission Filers)

2 FILER NAME Sergio J. Valdez

LENDER INFORMATION
4 Name of lender Sergio J Valdez
5 Lender address; City; State; Zip Code
\$16,650^{oc}
P.O. Box 456, Edinburg, TX 78540

GUARANTOR INFORMATION
 not applicable
6 Name of guarantor
7 Guarantor address; City; State; Zip Code

LENDER INFORMATION
Name of lender Sergio J Valdez
Lender address; City; State; Zip Code
\$30,000^{oc}
P.O. Box 456, Edinburg, TX 78540

GUARANTOR INFORMATION
 not applicable
Name of guarantor
Guarantor address; City; State; Zip Code

LENDER INFORMATION
Name of lender Sergio J. Valdez
Lender address; City; State; Zip Code
\$30,000^{oc}
P.O. Box 456, Edinburg, TX 78540

GUARANTOR INFORMATION
 not applicable
Name of guarantor
Guarantor address; City; State; Zip Code

LENDER INFORMATION
Name of lender
Lender address; City; State; Zip Code

GUARANTOR INFORMATION
 not applicable
Name of guarantor
Guarantor address; City; State; Zip Code

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

ASSETS VALUED AT \$500 OR MORE

SCHEDULE M

The Instruction Guide explains how to complete this form.

1 Total pages Schedule M:

2 FILER NAME

Sergio J. Valdez

3 Filer ID (Ethics Commission Filers)

1

4 Description of Asset

N/A

Description of Asset

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES
FOR TRAVEL OUTSIDE OF TEXAS**

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: <u>1</u>
2 FILER NAME <u>Sergio J Valdez</u>		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee <u>N/A</u>		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Sergio J Valdez

2 Filer ID (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