



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

**14 C/OH NAME**  
ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)

**15 Filer ID** (Ethics Commission Filers)

**16 NOTICE FROM POLITICAL COMMITTEE(S)**

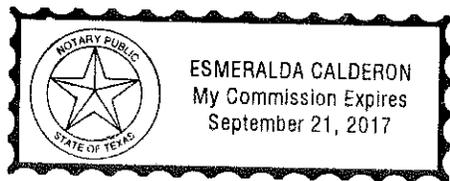
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

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

Additional Pages

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 179,105.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 195,671.32
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 364,591.09
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 104,000.00

**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.

*AC Cuellar*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ARTURO C. CUELLAR, JR., this the 15TH day of JANUARY 20 16, to certify which, witness my hand and seal of office.

*Esmeralda Calderon*

Esmeralda Calderon

Notary Public

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 179,105.00
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 530.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 104,000.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 195,671.32
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 3,419.72
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <del>1,265.00</del>

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  ***SEE ATTACHED*** 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

DATE	CONTRIBUTOR	ADDRESS	CITY	ST	ZIP	AMOUNT	OCCUPATION/ JOB TITLE	EMPLOYER
8/20/2015	BENNETT INTERESTS	P.O. BOX 365	LA BLANCA	TX	78558	\$250.00	INVESTOR	SELF
8/20/2015	PROGRESO INTERNATIONAL BRIDGE	P.O. BOX 130	PROGRESO	TX	78579	\$250.00		
8/21/2015	MICHAEL B. RHODES	1020 ALLEN VIEW DR.	NEW BRAUNFELS	TX	78132	\$2500.00		
8/21/2015	THAD R MOORE	P.O. BOX 40044	SOUTH PADRE ISLAND	TX	78597	\$1000.00		
8/27/2015	EDDIE LUCIO III CAMPAIGN ACCOUNT	P.O. BOX 2106	SAN BENITO	TX	78586	\$500.00		
8/25/2015	W.C. ROSS	P.O. BOX 717	MERCEDES	TX	78570	\$500.00		
8/25/2015	JUAN F. VILLESAS	7010 N. FM 493	DOMINA	TX	78537	\$1500.00		
7/27/2015	ERO INTERNATIONAL, LLP DBA ERO ARCHITECTS	300 S. 8TH STREET	MCALLEN	TX	78501	\$1500.00		
7/30/2015	RABA-KISTNER PAC	P.O. BOX 690287	SAN ANTONIO	TX	78289	\$1500.00		
8/5/2015	GENE GUERRA	P.O. BOX 5488	MCALLEN	TX	78502	\$500.00		
8/7/2015	H&R INSULATION	8755 W. CHARLES GREEN	MONTTE ALTO	TX	78538	\$500.00		
8/6/2015	QUALITY READYMIX LTD., LLP	P.O. BOX 10100	CORPUS CHRISTI	TX	78460	\$5000.00		
8/12/2015	HDR POLITICAL ACTION COMMITTEE	8404 INDIAN HILLS DRIVE	OMAHA	NE	68114	\$500.00	FEC ID# C00103903	
8/12/2015	ALEX BARRERA	2825 TUSCARORA	CORPUS CHRISTI	TX	78410	\$1500.00		
8/17/2015	LE FEVRE ENGINEERING	612 W. NOLANA, STE. 520	MCALLEN	TX	78504	\$5000.00		
8/17/2015	RED SEAGULL MARINE SERVICES LLC	710 TRINITY RD.	MISSION	TX	78572	\$250.00		
8/17/2015	TRUCKERS INSURANCE	P.O. BOX 3783	MCALLEN	TX	78502	\$500.00		
8/18/2015	JOHN A MORKOVSKY	8791 FM 1303	FLORESVILLE	TX	78114	\$500.00		
8/18/2015	RAUL PALMA	705 DAWSON DR.	EDINBURG	TX	78539	\$1750.00		
8/19/2015	TEXAS CORDIA CONST., LLC.	3149-A CENTER POINTE DRIVE	EDINBURG	TX	78539	\$2500.00		
8/19/2015	LE FEVRE ENGINEERING	612 W. NOLANA, STE. 520	MCALLEN	TX	78504	\$5000.00		
9/1/2015	DOS CRUCES PROPERTIES, LTD	P.O. BOX 959	EDINBURG	TX	78540	\$2500.00		
9/1/2015	MIGUEL CHANIN	2201 E. AUGUSTA SQ.	MCALLEN	TX	78503	\$1500.00		
9/2/2015	BOBBY SPARKS	13230 MILE 2 1/2 EAST	MERCEDES	TX	78570	\$1000.00		
9/2/2015	L. KEITH FOX	P.O. BOX 2288	MCALLEN	TX	78501	\$1000.00		
9/1/2015	RENE A. RAMIREZ	612 W. NOLANA AVE. STE. 415	MCALLEN	TX	78504	\$1000.00		
9/2/2015	GARZA & ASSOCIATES	1419 DOVE AVENUE, SUITE 1	MCALLEN	TX	78504	\$1500.00		
9/2/2015	JAVIER O. DE LA GARZA, D.D.S., P.A.	461 N. WESTGATE DR.	WESLACO	TX	78596	\$500.00		
8/31/2015	LOUIS H. JONES, JR	3100 W. ALABAMA ST.	HOUSTON	TX	77098	\$2500.00		
8/24/2015	MIN CHOW HEW	613 CONTADORA	SAN ANTONIO	TX	78258	\$2500.00		
8/26/2015	DEREN LI	7619 WELLFORD TRL.	SUGAR LAND	TX	77479	\$5000.00		
0827/2015	RABA-KISTNER PAC	P.O. BOX 690287	SAN ANTONIO	TX	78289	\$1000.00		
8/28/2015	PAULA VILLANUEVA	402 W. MILE 10 RD. N	WESLACO	TX	78599	\$1500.00		
8/31/2015	VERONICA REYES	913 ANTHONY ST	WESLACO	TX	78596	\$500.00		
8/31/2015	MARK W. LUPHER	17406 MASONRIDGE DR.	HOUSTON	TX	77095	\$5000.00		
8/31/2015	RUIFINO GARZA RANCH ACCOUNT	3779 N. BENTSEN PALM DR.	MISSION	TX	78574	\$5000.00		

9/1/2015	JESUS SALINAS	1201 E. EXPRESSWAY 83	MISSION	TX	78572	\$5000.00		
9/1/2015	BRIAN A. HUMPHREYS	1209 BELLA VISTA P.O. BOX 8142	WESLACO	TX	78596	\$900.00		
9/1/2015	JEFFREY W. EVERITT POD	705 AMETHYST DR.	WESLACO	TX	78596	\$2500.00		
8/27/2015	SOUTHERN TRENCHLESS SOLUTIONS, LLC DBA BLUEGREEN MUNICIPAL GENERAL ACCOUNT	1200 W. EXPRESSWAY 83	LA FERIA	TX	78559	\$2500.00		
8/27/2015	LINEBARGER GOGGAN BLAIR & SAMPSON, LLP ATTORNEYS AT LAW JOE QUIROGA	P.O. BOX 17428	AUSTIN	TX	78760	\$5000.00		
9/4/2015	RAMON SAENZ	10209 E. MONTECRISTO	EDINBURG	TX	78542	\$5000.00		
8/13/2015	DANIEL ORTEGA RENTAL ACCOUNT	P.O. BOX 1159	ELSA	TX	78543	\$1000.00		
8/27/2015	MEMORIAL FUNERAL HOME	311 E. EXPRESSWAY 83	SAN JUAN	TX	78589	\$1000.00		
8/28/2015	MEMORIAL FUNERAL HOME	P.O. BOX 1517/ 208 E. CANTON	EDINBURG	TX	78540	\$1500.00		
9/2/2015	CRAIG F STONG	15920 REYES RDG	HELOTES	TX	78023	\$5000.00		
9/2/2015	PRO-MEDIC E.M.S., LLC	P.O. BOX 2190	SAN JUAN	TX	78589	\$500.00		
9/2/2015	OFELIA RODRIGUEZ	2717 N. NEBRASKA AVE.	WESLACO	TX	78596	\$250.00		
9/2/2015	HIDALGO COUNTY PROPERTY TAX SERVICE, LTD	6013 N. 10TH ST	MCALLEN	TX	78504	\$250.00		
9/3/2015	APPRAISAL HAUS	502 W. KUHN STREET	EDINBURG	TX	78541	\$500.00		
9/3/2015	SALAZAR INSURANCE GROUP LLC	611 E. LOOP 499	HARLINGEN	TX	78550	\$2500.00		
9/3/2015	JASON R. EBERLE	P.O. BOX 1028	DOMINA	TX	78537	\$1500.00		
9/4/2015	ALFONSO QUINTANILLA	100 E. EMORY AVE	MCALLEN	TX	78504	\$500.00		
9/4/2015	DANIEL ORTEGA RENTAL ACCOUNT	P.O. BOX 1159	ELSA	TX	78543	\$1500.00		
9/4/2015	ALEGRE & ASSOCIATES BUSINESS CONSULTING SERVICE	801 W. NOLANA AVE., STE 200	MCALLEN	TX	78504	\$2500.00		
9/3/2015	ANDY RAMOS	304 LARK AVE.	MCALLEN	TX	78504	\$2500.00		
9/5/2015	IRENE RODRIGUEZ	P.O. BOX 2203	ELSA	TX	78543	\$425.00		
9/4/2015	JAVIER VILLALOBOS	1515 FULLERTON AVE.	MCALLEN	TX	78504	\$500.00		
9/4/2015	BLAKE LEE CAESAR	2178 COUNTY ROAD 4516	CASTROVILLE	TX	78009	\$2500.00		
9/3/2015	J BALDERAS					\$1500.00		
9/3/2015	MAURICIO J. BALDERAS	2805 SANTA ANA	MISSION	TX	78572	\$1500.00		
9/4/2015	JOHN DAVID FRANZ	400 N. MCCOLL RD, STE B	MCALLEN	TX	78501	\$1000.00		
9/2/2015	JOSE M. FLORES CAMPAIGN FUND	P.O. BOX 310	MISSION	TX	78573	\$2500.00		
9/3/2015	LAURA CONTRERAS PENA	3716 TIGRIS	EDINBURG	TX	78539	\$1500.00		
9/5/2015	DANA S. SALINAS	13502 N. 33RD LN	EDINBURG	TX	78541	\$40.00		
9/5/2015	SAUL DANIEL MALDONADO	801 E. FERGUSON, STE B	PHARR	TX	78577	\$1500.00		
9/4/2015	DANIEL G. RIOS	323 NOLANA	MCALLEN	TX	78504	\$2500.00		
9/5/2015	ISRAEL ROCHA JR.	P.O. BOX 1410	ELSA	TX	78543	\$1000.00		
9/3/2015	CYNTHIA A MARQUEZ	222 E. HOUSTON ST. APT 904	SAN ANTONIO	TX	78205	\$2000.00		
9/5/2015	JOSE E. PAREDES	3185 SMITH RD.	BROWNSVILLE	TX	78526	\$40.00		
9/4/2015	JAIME J. MUNOZ	P.O. BOX 47	SAN JUAN	TX	78589	\$250.00		

9/4/2015	RICHARD A. GARZA	3910 W. FREDDY GONZALEZ DR.	EDINBURG	TX	78539	\$5000.00	
9/1/2015	ROBERT PENNA JR. DBA TEXAS ENERGY DEVELOPMENT	P.O. BOX 1947	EDINBURG	TX	78540	\$500.00	
9/15/2015	JAMIE A. GONZALEZ JR.	817 E. ESPERANZA AVE.	MCALLEN	TX	78501	\$500.00	
9/4/2015	DAVID L. EARL	6 WEST OAKS COURT	SAN ANTONIO	TX	78213	\$500.00	
9/4/2015	RUBEN CARDENAS	603 NORTH TEXAS BLVD.	WESLACO	TX	78596	\$500.00	
9/15/2015	R. VAUGHAN	105 W. CHAPARRAL ST.	WESLACO	TX	78596	\$500.00	
9/18/2015	MARK BRUNNEMANN	1830 LION LAKE DR. NORTH	PROGRESO LAKES	TX	78596	\$500.00	
9/5/2015	NOELIA TELLES	P.O. BOX 2386	ELSA	TX	78543	\$5000.00	
9/14/2015	HUGO P. GONZALEZ JR.	2614 HYLTON AVE.	EDINBURG	TX	78539	\$2500.00	
9/17/2015	BORDER HEALTH PAC	612 W. NOLANA, BLDG 300, STE 340	MCALLEN	TX	78504	\$10000.00	
9/15/2015	GREG LAMANTIA	3900 N. MCCOLL RD.	MCALLEN	TX	78501	\$1000.00	
9/4/2015	ATLAS, HALL & RODRIGUEZ, LLP	P.O. DRAWER 3725	MCALLEN	TX	78502	\$1000.00	
9/9/2015	HALFF ASSOCIATES- STATE PAC	1201 N. BOWSER ROAD	RICHARDSON	TX	75081	\$1000.00	
9/18/2015	BURNS BROTHERS, LTDX	4216 N. US HWY 281	EDINBURG	TX	78542	\$1500.00	
9/4/2015	OHANLON MCCOLLUM & DEMERATH PC DBA OHANLON RODRIGUEZ BETANCOURT & DEMERATH/ BRANCH & OPERATING ACCT	808 WEST AVE	AUSTIN	TX	78701	\$500.00	
9/24/2015	RICK HARBISON	280125 DAL CIN DR.	SAN ANTONIO	TX	78260	\$250.00	
9/24/2015	THOMAS JOSEPH JENDRUSCH	1500 ORCHID AVE	MCALLEN	TX	78504	\$250.00	
9/24/2015	RAUL EDUARDO SESIN	2110 DIANE DRIVE	MISSION	TX	78572	\$250.00	
9/24/2015	CAST SHEET METAL LLC	P.O. BOX 5926	MCALLEN	TX	78502	\$1000.00	
9/1/2015	HIDALGO COUNTY EMERGENCY SERVICE FOUNDATION	P.O. BOX 2533	EDINBURG	TX	78540	\$1000.00	
10/7/2015	LA FLORESTA RV PARK	4140 LA FLORESTA ROAD	MERCEDDES	TX	78570	\$500.00	
10/7/2015	ARMANDO J. MARRQUIN	1313 MALTESE STREET	EDINBURG	TX	78539	\$500.00	
10/6/2015	HOWERO JASSO JR CAMPAIGN ACCOUNT	710 N. SHARY RD.	MISSION	TX	78572	\$1000.00	
10/6/2015	THE LAW OFFICES OF GUERRA & FARAH, PLLC	4101 WASHINGTON AVE., 3RD FLOOR	HOUSTON	TX	77007	\$500.00	
9/15/2015	S & B PAC TEXXAS CONTRIBUTION ACCT	P.O. BOX 266245	HOUSTON	TX	77207	\$250.00	
10/3/2015	FRANCISCO JAVIER MEDRANO	2109 NORTHGATE CIRCLE	WESLACO	TX	78596	\$500.00	
11/3/2015	GARY LOONEY	12514 CHAPEL BELL ST	SAN ANTONIO	TX	78530	\$1500.00	
11/3/2015	LINBARGER GOGGAN BLAIR & SAMPSON, LLP	P.O. BOX 17428	AUSTIN	TX	78760	\$2500.00	
11/4/2015	ANNETTE FRANZ	400 N. MCCOLL RD, STE B	MCALLEN	TX	78501	\$1000.00	
11/4/2015	WESLEY RICHARD LEFEVRE	3908 YELLOWHAMMER AVE	MCALLEN	TX	78504	\$5000.00	
11/4/2015	ANA L CANALES	336 ROYAL ST.	EDINEBURG	TX	78539	\$2500.00	
11/10/2015	RAMIRO GONZALEZ JR.	2690 N. SAM HOUSTON	SAN BENITO	TX	78586	\$1000.00	
10/30/2015	JEFF BRADLEY	8200 SUNBURST PKWY.	ROUND ROCK	TX	78681	\$250.00	
11/11/2015	CARLOTA C LEAL	515 S. AUSTIN ST.	SAN BENITO	TX	78586	\$1000.00	
11/6/2015	JOSUE B CANO	27/94 BAKER POTTS RD.	HARLINGEN	TX	78552	\$1000.00	
12/3/2015	H&R INSULATION	8755 W. CHARLES GREEN	MONTTE ALTO	TX	78538	\$100.00	

12/1/2015	GENE GUERRA	P.O. BOX 5488	MCALLEN	TX	78502	\$200.00	
12/1/2015	AMPRIIS PROPERTIES	P.O. BOX 2822	ELSA	TX	78543	\$50.00	
11/13/2015	LETICIA R. GARZA	1717 PEBBLE DR.	MISSION	TX	78574	\$1000.00	
						\$179105.00	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <span style="float: right;">1</span>	
2 FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 530.00	
5 Date 09/16/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A.C. CUELLAR, III	8 Amount of Contribution \$ 530.00	9 In-kind contribution description DEPUTIES SECURITY FOR KICKOFF
7 Contributor address; City; State; Zip Code 141 LION LAKE DR. SOUTH PROGRESO LAKES, TEXAS 78596		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) VICE PRESIDENT		11 Employer (FOR NON-JUDICIAL) (See Instructions) J-III CONCRETE CO., INC.	
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
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)			
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# LOANS

# SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <b>2</b>
2 FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 104,000.00
5 Date of loan 12/08/2011	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WESLEY RICHARD LEFEVRE	9 Loan Amount (\$) 25,000.00
6 Is lender a financial institution?  Y N XXX	8 Lender address; City; State; Zip Code 3908 YELLOWHAMMER AVE. MCALLEN, TEXAS 78504	10 Interest rate N/A
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions) ENGINEER		13 Employer (See Instructions) SELF
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor  ..... 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 04/20/2012	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A.C. CUELLAR, JR.	Loan Amount (\$) 50,000.00
Is lender a financial institution?  Y N XXX	Lender address; City; State; Zip Code 231 LION LAKE DR. SOUTH PROGRESO LAKES, TEXAS 78596	Interest rate N/A
		Maturity date N/A
Principal occupation / Job title (See Instructions) BUSINESSMAN		Employer (See Instructions) SELF
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor  ..... Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: 2 OF 2
<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$104,000.00
<b>5</b> Date of loan 05/28/2012	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) A.C. CUELLAR, JR.	<b>9</b> Loan Amount (\$) 29,000.00
<b>6</b> Is lender a financial institution?  Y    N    XX	<b>8</b> Lender address;                      City;            State;            Zip Code 231 LION LAKE DR. SOUTH PROGRESO LAKES, TEXAS 78596	<b>10</b> Interest rate N/A
		<b>11</b> Maturity date N/A
<b>12</b> Principal occupation / Job title (See Instructions) BUSINESSMAN		<b>13</b> Employer (See Instructions) SELF
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor  <b>18</b> Guarantor address;                      City;            State;            Zip Code	<b>19</b> Amount Guaranteed (\$)
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial institution?  Y    N	Lender address;                      City;            State;            Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>GUARANTOR INFORMATION</b>  <input type="checkbox"/> not applicable	Name of guarantor  Guarantor address;                      City;            State;            Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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

# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 07/09/2015	<b>5</b> Payee name WESLACO EAST HIGH SCHOOL				
<b>6</b> Amount (\$) 40.00	<b>7</b> Payee address; City; State; Zip Code 400 S. OKLAHOMA, WESLACO, TX 78596				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSOR- KAYLA CUELLAR			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/09/2015	Payee name WESLACO SOFTBALL BASEBALL				
Amount (\$) 50.00	Payee address; City; State; Zip Code P.O. BOX 1350, WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check If Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/09/2015	Payee name WESLACO SOFTBALL BASEBALL				
Amount (\$) 25.00	Payee address; City; State; Zip Code P.O. BOX 1350, WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSOR- ADRIANA GONZALEZ			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/09/2015	<b>5</b> Payee name BRIDGET PEREZ	
<b>6</b> Amount (\$) 50.00	<b>7</b> Payee address; City; State; Zip Code 604 N. NOGALES, LA VILLA, TX 78562	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	SOFTBALL SPONSORSHIP	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date 07/15/2015	Payee name CARRERA COMMUNICATIONS	
Amount (\$) 15000.00	Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	POLITICAL CAMPAIGN CONSULTANT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date 07/15/2015	Payee name MERCEDES POP WARNER	
Amount (\$) 100.00	Payee address; City; State; Zip Code 1108 E. 11TH ST., MERCEDES, TX 78570	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	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

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# POLITICAL EXPENDITURES MADE 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  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 07/16/2015		<b>5</b> Payee name MARIA E. ALVARADO			
<b>6</b> Amount (\$) 250.00		<b>7</b> Payee address; City; State; Zip Code 730 N. DAHLIA, PHARR, TX 78577			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRACT LABOR		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  GOTV	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought                      Office held	
Date 07/17/2015		Payee name HECTOR J HERNANDEZ			
Amount (\$) 1550.40		Payee address; City; State; Zip Code 905 W. 7TH STREET, WESLACO, TX 78596			
<b>PURPOSE OF EXPENDITURE</b>		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  SCREEN PRINT SERVICE (T-SHIRTS)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought                      Office held	
Date 07/17/2015		Payee name CHARLIE'S MEAT MARKET			
Amount (\$) 167.60		Payee address; City; State; Zip Code 211 W. EDINBURG, ELSA, TX 78543			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) FOOD/ BEVERAGE/ EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CAMPAIGN MEETING	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought                      Office held	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 07/26/2015	<b>5</b> Payee name MID VALLEY TOWN CRIER				
<b>6</b> Amount (\$) 149.00	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 3267, MCALLEN, TEXAS 78502				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  MVTC FOOTBALL POSTER			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/29/2015	Payee name WEABC				
Amount (\$) 320.00	Payee address; City; State; Zip Code 131 PLEASANTVIEW DRIVE, WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  WESLACO EAST FOOTBALL PROGRAM			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/29/2015	Payee name CHIEF'S TRIBAL COUNCIL				
Amount (\$) 200.00	Payee address; City; State; Zip Code 7520 N. VAL VERDE RD., DONNA, TX 78537				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  DONNA NORTH FOOTBALL PROGRAM			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 07/29/2015	<b>5</b> Payee name EE ISD				
<b>6</b> Amount (\$) 200.00	<b>7</b> Payee address; City; State; Zip Code 107 N. MILE 4W, EDCOUCH, TX 78538				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EDCOUCH ELSA FOOTBALL PROGRAM			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/29/2015	Payee name MERCEDES HIGH SCHOOL				
Amount (\$) 200.00	Payee address; City; State; Zip Code 1200 S. FLORIDA, MERCEDES, TX 78570				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MERCEDES FOOTBALL PROGRAM			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/29/2015	Payee name DONNA REDSKINS QUARTERBACK CLUB				
Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. BOX 683, DONNA, TX 78537				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONNA FOOTBALL PROGRAM			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 07/29/2015	<b>5</b> Payee name DONNA REDSKINS QUARTERBACK CLUB				
<b>6</b> Amount (\$) 250.00	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 683, DONNA, TX 78537				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSORSHIP- GEORGE HERNANDEZ			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/29/2015	Payee name J NAVA STUDIOS				
Amount (\$) 285.00	Payee address; City; State; Zip Code 308A SOUTH TEXAS BLVD., WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  WESLACO HIGH FOOTBALL PROGRAM			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 07/29/2015	Payee name NANDIPATY FAMILY LIMITED PARTNERSHIP				
Amount (\$) 2500.00	Payee address; City; State; Zip Code 1620 E. 8TH ST. STE.1, WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) RENTAL EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  \$1250 DEPOSIT & 1ST MO. RENT WESLACO HEADQUARTERS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)		
<b>4</b> Date 07/29/2015	<b>5</b> Payee name A.C. CUELLAR, III			
<b>6</b> Amount (\$) 2721.08	<b>7</b> Payee address; City; State; Zip Code 141 LION LAKE DR. SOUTH, PROGRESO LAKES TX 78596			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  REIMBURSEMENT	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  ONLINE ORDER OF TSHIRTS		
	<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date 07/29/2015	Payee name J NAVA STUDIOS			
Amount (\$) 370.00	Payee address; City; State; Zip Code 308A SOUTH TEXAS BLVD., WESLACO, TX 78596			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSORSHIP- MICHAEL OCHOA		
	<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date 08/05/2015	Payee name OSCAR GARCIA JR.			
Amount (\$) 120.00	Payee address; City; State; Zip Code 21223 MAIN STREET, EDCOUCH, TX 78538			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  MEDICAL FUNDRAISER		
	<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 08/06/2015	<b>5</b> Payee name INXS EMBROIDERY, INC.				
<b>6</b> Amount (\$) 1407.79	<b>7</b> Payee address; City; State; Zip Code 821 N. 10TH ST., MCALLEN, TX 78501				
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</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 LOGO ON SHIRTS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 08/06/2015	Payee name MID VALLEY TOWN CRIER				
Amount (\$) 175.00	Payee address; City; State; Zip Code P.O. BOX 3267, MCALLEN, TX 78502				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MVTC HIGH SCHOOL FOOTBALL TAB			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 08/06/2015	Payee name 913 SPORTS				
Amount (\$) 125.00	Payee address; City; State; Zip Code P.O. BOX 596, LA VILLA, TX 78562				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP- DERRIK PALOMIN			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> 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 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 08/06/2015	<b>5</b> Payee name BETO'S SCREEN PRINTING
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<b>6</b> Amount (\$) 1450.00	<b>7</b> Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
		POLITICAL SIGNS

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/11/2015	Payee name CHARLIE'S MEAT MARKET
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Amount (\$) 469.03	Payee address; City; State; Zip Code 211 W. EDINBURG, ELSA, TX 78543
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION (445.43) FOOD/ BEVERAGE EXPENSE (23.60)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FUNERAL-RANDY RODRIGUEZ EE JR. HIGH CHEERLEADERS CAMPAIGN MEETING

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/11/2015	Payee name DELTA AREA AUTISM SOCIETY
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Amount (\$) 800.00	Payee address; City; State; Zip Code P.O. BOX 2575, ELSA, TEXAS 78543
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP- RIDE FOR AUTISM

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/12/2015	<b>5</b> Payee name MERCEDES AREA CHAMBER OF COMMERCE	
<b>6</b> Amount (\$) 500.00	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 37/ 320 SOUTH OHIO, MERCEDES, TX 78570	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSORSHIP- TEXAS STREET FESTIVAL
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 08/12/2015	Payee name MIRIAM MORENO	
Amount (\$) 50.00	Payee address; City; State; Zip Code 1029 ALCALA, MISSION, TX 78573	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  MEDICAL BENEFIT
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 08/17/2015	Payee name CITY OF ELSA/ ELSA PD	
Amount (\$) 100.00	Payee address; City; State; Zip Code P.O. BOX 427, ELSA, TX 78543	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	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 _____	

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# POLITICAL EXPENDITURES MADE 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 Credit Card Payment	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)
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The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 08/19/2015	<b>5</b> Payee name CITY OF DONNA				
<b>6</b> Amount (\$) 50.00	<b>7</b> Payee address; City; State; Zip Code 307 S. 12TH ST., DONNA, TX 78537				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  FEES	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL SIGN PERMIT			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 08/20/2015	Payee name LEOPOLDO DIAZ				
Amount (\$) 100.00	Payee address; City; State; Zip Code 101 PLEASANTVIEW DR., WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 08/21/2015	Payee name OLIVIA GARCIA				
Amount (\$) 500.00	Payee address; City; State; Zip Code				
<b>PURPOSE OF EXPENDITURE</b>	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			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 08/21/2015	<b>5</b> Payee name BETO'S SCREEN PRINTING
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<b>6</b> Amount (\$) 5185.00	<b>7</b> Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
		POLITICAL SIGNS

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/21/2015	Payee name SELINA MEDRANO
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Amount (\$) 1500.00	Payee address; City; State; Zip Code 1303 PINE AVENUE, PHARR, TX 78577
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
		POLITICAL CAMPAIGN CONSULTANT

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/27/2015	Payee name MERCEDES POP WARNER
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Amount (\$) 50.00	Payee address; City; State; Zip Code 1108 E. 11TH ST., MERCEDES, TX 78570
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
		SPONSOR- NATHAN VILCHES

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 08/28/2015	<b>5</b> Payee name DAVID BARBOSA				
<b>6</b> Amount (\$)  1500.00	<b>7</b> Payee address; City; State; Zip Code  1809 JOLEIGH, MERCEDES, TX 78570				
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  8' X 12' POLITICAL SIGN			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/03/2015	Payee name SGT BENITO ALANIZ POST 7473				
Amount (\$)  100.00	Payee address; City; State; Zip Code  ELSA, TX 78543				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  MEDICAL EXPENSE DONATION			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/03/2015	Payee name EDWARD MEJIA				
Amount (\$)  100.00	Payee address; City; State; Zip Code  721 E. TORRITOS ST., WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSORSHIP- ULTIMATE FRISBEE TEAM			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/03/2015	<b>5</b> Payee name AMATEUR GOLF CHAMPIONSHIP	
<b>6</b> Amount (\$) 145.00	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 220, MCALLEN, TX 78505	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSORSHIP- JOSE AVITA JR.
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 09/03/2015	Payee name CWV	
Amount (\$) 700.00	Payee address; City; State; Zip Code 1501 INTERNATIONAL BLVD., WESLACO, TX 78596	
<b>PURPOSE OF EXPENDITURE</b>	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  VENUE FOR KICKOFF PARTY- BALANCE
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 09/03/2015	Payee name CHARLIE'S MEAT MARKET	
Amount (\$) 406.91	Payee address; City; State; Zip Code 211 W. EDINBURG, ELSA, TX 78543	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  FOOD/ BEVERAGE/ EXPENSE (182.91) CONTRIBUTION/ DONATION (224.00)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CAMPAIGN MEETING (182.91) FUNDRAISER- BLANCA FLORES, LA VILLA (140.00) FUNERAL- RANDY RORIGUEZ (84.00)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 09/04/2015	<b>5</b> Payee name INXS EMBROIDERY INC.				
<b>6</b> Amount (\$) 1498.78	<b>7</b> Payee address; City; State; Zip Code 821 N. 10TH ST., MCALLEN, TX 78501				
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) AVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  EMBROIERY LOGO ON SHIRTS & COOLERS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/04/2015	Payee name DAVID BARBOSA				
Amount (\$) 1600.00	Payee address; City; State; Zip Code 1809 JOLEIGH, MERCEDES, TX 78570				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  8' X 12' POLITICAL SIGN			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/04/2015	Payee name DAVID BARBOSA				
Amount (\$) 1300.00	Payee address; City; State; Zip Code 1809 JOLEIGH, MERCEDES, TX 78570				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  3- POLITICAL TRAILERS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> 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 POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/04/2015	<b>5</b> Payee name MID VALLEY TOWN CRIER	
<b>6</b> Amount (\$) 1038.00	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 3267, MCALLEN, TEXAS 78502	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  MVTC POLITICAL ADVERTISEMENT
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 09/04/2015	Payee name BETO'S SCREEN PRINTING	
Amount (\$) 5050.68	Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL SIGNS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 09/08/2015	Payee name PRINT WORKS	
Amount (\$) 8316.31	Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542	
<b>PURPOSE OF EXPENDITURE</b>	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  FLYERS/ PUSHCARDS/ STICKERS/ BANNER
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/08/2015	<b>5</b> Payee name DAVID RODRIGUEZ	
<b>6</b> Amount (\$) 1682.79	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 2203 ELSA, TX 78543	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  REIMBURSEMENT	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  FOOD/ BEVERAGES, AVERTISING EXPENSE
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 09/09/2015	Payee name MERCEDES ENTERPRISE	
Amount (\$) 200.00	Payee address; City; State; Zip Code 230 S. TEXAS, MERCEDES, TX 78570	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  PRINT AD
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 09/09/2015	Payee name CARRERA COMMUNICATIONS	
Amount (\$) 5925.00	Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL CAMPAIGN CONSULTANT
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES MADE 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  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/10/2015	<b>5</b> Payee name R COMMUNICATIONS	
<b>6</b> Amount (\$) 1450.00	<b>7</b> Payee address; City; State; Zip Code 1201 N. JACKSON, STE. 900, MCALLEN, TX 78501	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RADIO ADVERTISING
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date 09/15/2015	Payee name SAM'S CLUB	
Amount (\$) 579.20	Payee address; City; State; Zip Code 1400 E. JACKSON AVE., MCALLEN, TX 78501	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/ BEVERAGE/ EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CUPCAKES FOR KICKOFF
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date 09/17/2015	Payee name SILVIA BETANCOURT	
Amount (\$) 745.00	Payee address; City; State; Zip Code 209 N. RETAMA LN., WESLACO, TX 78596	
<b>PURPOSE OF EXPENDITURE</b>	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 BALLOON DECORATIONS FOR KICKOFF
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/17/2015	<b>5</b> Payee name SELINA MEDRANO	
<b>6</b> Amount (\$) 1500.00	<b>7</b> Payee address; City; State; Zip Code 1303 PINE AVENUE, PHARR, TX 78577	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL CAMPAIGN CONSULTANT
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 09/21/2015	Payee name EDDIE GUERRA CAMPAIGN	
Amount (\$) 500.00	Payee address; City; State; Zip Code P.O. BOX 418, LINN, TX 78563	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CAMPAIGN CONTRIBUTION
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 09/23/2015	Payee name WYFL	
Amount (\$) 200.00	Payee address; City; State; Zip Code P.O. BOX 1261, WESLACO, TX 78599	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  ELI RUBIO/ SIGN SPONSOR
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES MADE 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  
Credit Card Payment

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 ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)		3 Filer ID (Ethics Commission Filers)	
4 Date 09/23/2015		5 Payee name ELIBERTO GUERRA CAMPAIGN			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 4265 6TH ST., RAYMONDVILLE, TX 78580			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION		(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 TOURNAENT/ SPONSOR	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 09/24/2015		Payee name BETO'S SCREEN PRINTING			
Amount (\$) 5720.19		Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL SIGNS / MAGNETIC SIGNS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 09/24/2015		Payee name CASSANDRA ALTAMIRANO			
Amount (\$) 50.00		Payee address; City; State; Zip Code PO BOX 566, LA VILLA, TX 78563			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION		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	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 09/25/2015	<b>5</b> Payee name KIMBERLY ROCHA				
<b>6</b> Amount (\$) 300.00	<b>7</b> Payee address; City; State; Zip Code 3533 CESSNA AVE, EDINBURG, TX 78542				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRACT LABOR	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/25/2015	Payee name PRINT WORKS				
Amount (\$) 1087.91	Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542				
<b>PURPOSE OF EXPENDITURE</b>	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 PUSHCARDS/ ENDORSEMENTS/ BUS CARDS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/25/2015	Payee name BRAND BOOSTERS CO., LLC				
Amount (\$) 216.50	Payee address; City; State; Zip Code 3607 S. L LANE, MCALLEN, TX 78503				
<b>PURPOSE OF EXPENDITURE</b>	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 FULL COLOR BANNER			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 09/25/2015	<b>5</b> Payee name DAVID BARBOSA				
<b>6</b> Amount (\$) 350.00	<b>7</b> Payee address; City; State; Zip Code 1809 JOLEIGH, MERCEDES, TX 78570				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  PAINT 52' POLITICAL TRAILER			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/30/2015	Payee name GREAT TEXAS SPORTS				
Amount (\$) 150.00	Payee address; City; State; Zip Code PO BOX 302829, AUSTIN, TX 78703				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  AD ON MERCEDES BASKETBALL SCHEDULES			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 09/03/2015	Payee name EDINBURG PARKS & RECREATON				
Amount (\$) 100.00	Payee address; City; State; Zip Code 415 W. UNIVERSITY DR., EDINBURG, TX 78540				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSOR- SOFTBALL TEAM ACE HOLES			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> 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 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)
Credit Card Payment			

The instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/30/2015	<b>5</b> Payee name GATEWAY PRINTING	
<b>6</b> Amount (\$) 564.29	<b>7</b> Payee address; City; State; Zip Code 315 S. CLOSNER, EDINBURG, TX 78540	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FITTED TABLE CLOTH WITH LOGO
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 09/30/2015	Payee name OSCAR SALINAS	
Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. BOX 1101, ALAMO, TX 78516	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COOKOFF
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 10/05/2015	Payee name NANDIPATY FAMILY LIMITED PARTNERSHIP	
Amount (\$) 1250.00	Payee address; City; State; Zip Code 1620 E. 8TH ST., STE 1, WESLACO, TX 78596	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) RENTAL EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WESLACO HEADQUARTERS RENT
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES MADE 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  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/5/2015	<b>5</b> Payee name J C A P A S	
<b>6</b> Amount (\$)  250.00	<b>7</b> Payee address; City; State; Zip Code  1201 W. UNIVERSITY DR., EDINBURG, TX 78539	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	<b>(b)</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 TOURNAENT/ SPONSOR
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 10/05/2015	Payee name GENEVA SALAS	
Amount (\$)  300.00	Payee address; City; State; Zip Code  607 JOYCE ST., WESLACO, TX 78599	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSORSHIP
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 10/05/2015	Payee name DAVID RODRIGUEZ	
Amount (\$)  525.66	Payee address; City; State; Zip Code  P.O. BOX 2203 ELSA, TX 78543	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  REIMBURSEMENT	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  FOOD/ BEVERAGE, ADVERTISING
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 10/05/2015	<b>5</b> Payee name CHARLIE'S MEAT MARKET				
<b>6</b> Amount (\$) 382.00	<b>7</b> Payee address; City; State; Zip Code 211 W. EDINBURG, ELSA, TX 78543				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) FOOD/ BEVERAGE/ EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CAMPAIGN MEETING			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 10/6/2015	Payee name TEXAS DEMOCRATIC PARTY				
Amount (\$) 900.00	Payee address; City; State; Zip Code 4818 E. BEN WHITE BLVD, STE 104 AUSTIN, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FEES	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  ONLINE VOTER FILE LICENSE			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 10/6/2015	Payee name MID VALLEY TOWN CRIER				
Amount (\$) 175.00	Payee address; City; State; Zip Code P.O. BOX 3267, MCALLEN, TEXAS 78502				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  HALLOWEEN COLOR CONTEST/ SAFETY			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/8/2015	<b>5</b> Payee name CARRERA COMMUNICATIONS	
<b>6</b> Amount (\$) 3000.00	<b>7</b> Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONSULTING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL CAMPAIGN CONSULTANT
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date 10/9/2015	Payee name NATHAN GOWER SCHWARZ	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 712 WALNUT, MCALLEN, TX 78504	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  DATA ANALYSIST
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date 10/12/2015	Payee name HECTOR J HERNANDEZ	
Amount (\$) 646.00	Payee address; City; State; Zip Code 905 W. 7TH STREET, WESLACO, TX 78596	
<b>PURPOSE OF EXPENDITURE</b>	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  SCREEN PRINTING SERVICE (TSHIRTS)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES MADE 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
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 10/13/15	<b>5</b> Payee name BETO'S SCREEN PRINTING				
<b>6</b> Amount (\$) 3955.00	<b>7</b> Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL SIGNS / MAGNETIC SIGNS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 10/13/15	Payee name KIMBERLY ROCHA				
Amount (\$) 1110.00	Payee address; City; State; Zip Code 3533 CESSNA AVE, EDINBURG, TX 78542				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRACT LABOR	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  GOTV			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 10/13/15	Payee name PRINT WORKS				
Amount (\$) 467.96	Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542				
<b>PURPOSE OF EXPENDITURE</b>	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  PUSHCARDS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 10/14/2015	<b>5</b> Payee name MARCO PEREZ				
<b>6</b> Amount (\$) 3000.00	<b>7</b> Payee address; City; State; Zip Code 2008 W. JONQUIL, MCALLEN, TX 78501				
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  FIELD CONSULTANT/ MAP STUDIES			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 10/14/15	Payee name MARCO PEREZ				
Amount (\$) 2000.00	Payee address; City; State; Zip Code 2008 W. JONQUIL, MCALLEN, TX 78501				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  FIELD CONSULTANT/ MAP STUDIES			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 10/14/15	Payee name JESSICA MORENO				
Amount (\$) 100.00	Payee address; City; State; Zip Code 16913 CATHERINE ST, EDCOUCH TX 78538				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  HEADSTART SHIRT DONATION			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/15	<b>5</b> Payee name WESLACO PANTHERS	
<b>6</b> Amount (\$) 100.00	<b>7</b> Payee address; City; State; Zip Code 1005 W. PIKE, WESLACO, TX 78596	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	GIRLS BASKETBALL	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date 10/15/15	Payee name HOLY SPIRIT PARISH	
Amount (\$) 100.00	Payee address; City; State; Zip Code 2201 MARTIN AVE, MCALLEN, TX 78502	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	GIRLS BASKETBALL	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date 10/15/15	Payee name HARGILL COMMUNITY CHRUCH	
Amount (\$) 500.00	Payee address; City; State; Zip Code PO BOX 25, HARGILL, TX 78549	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	PAN DE CAMPO COOKOFF	
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 POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)		3 Filer ID (Ethics Commission Filers)	
4 Date 10/16/15		5 Payee name EDWARD MEJIA			
6 Amount (\$) 100.00		7 Payee address; City; State; Zip Code 721 E. TORRITOS ST., WESLACO, TX 78596			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  MEDICAL BILLS DONATION	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/17/15		Payee name JAIME "JERRY" MUNOZ CAMPAIGN			
Amount (\$) 500.00		Payee address; City; State; Zip Code PO BOX 47, SAN JUAN 78589			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  TEAM SPONSOR- SKEET SHOOT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/20/15		Payee name BETO'S SCREEN PRINTING			
Amount (\$) 1159.50		Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL SIGNS / MAGNETIC SIGNS	
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 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/19/2015	<b>5</b> Payee name KIMBERLY ROCHA	
<b>6</b> Amount (\$) 981.00	<b>7</b> Payee address; City; State; Zip Code 3533 CESSNA AVE, EDINBURG, TX 78542	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONTRACT LABOR	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  GOTV
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 10/22/2015	Payee name JOE FLORES CAMPAIGN	
Amount (\$) 1000.00	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CAMPAIGN CONTRIBUTION
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 10/23/2015	Payee name RCR	
Amount (\$) 1700.00	Payee address; City; State; Zip Code PO BOX 1793, ELSA, TX 78543	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  COOKOFF- SPONSOR 4 TEAMS
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 10/26/15	<b>5</b> Payee name DAVID SANCHEZ				
<b>6</b> Amount (\$) 100.00	<b>7</b> Payee address; City; State; Zip Code PO BOX 127, EDCOUCH, TX 78538				
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONTRIBUTON/ DONATION	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  EE CROSSCOUNTRY SPONSORSHIP			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 10/26/15	Payee name LA BLANCA 4H CLUB				
Amount (\$) 100.00	Payee address; City; State; Zip Code 17539 FM 493, LA BLANCA, TX 78542				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTON/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SPONSOR- JESSE PEREZ			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 11/2/15	Payee name HARLOD'S COUNTRY KITCHEN				
Amount (\$) 1607.92	Payee address; City; State; Zip Code 2111 E. BUS. HWY 83, DONNA, TS 78537				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  FOOD/ BEVERAGE/ EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  THANKSGIVING LUNCHEON			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 11/2/15	<b>5</b> Payee name HIDALGO COUNTY DEMOCRATIC PARTY				
<b>6</b> Amount (\$) 1000.00	<b>7</b> Payee address; City; State; Zip Code 4001 N. 23RD ST, MCALLEN, TX 78501				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  FEES	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  BALLOT BASH			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 11/2/15	Payee name JOEY GARZA CAMPAIGN				
Amount (\$) 1000.00	Payee address; City; State; Zip Code				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CAMPAIGN CONTRIBUTION			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 11/2/2015	Payee name KIMBERLY ROCHA				
Amount (\$) 981.00	Payee address; City; State; Zip Code 3533 CESSNA AVE, EDINBURG, TX 78542				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRACT LABOR	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  GOTV			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/4/15	<b>5</b> Payee name CHARLIE'S MEAT MARKET	
<b>6</b> Amount (\$) 89.77	<b>7</b> Payee address; City; State; Zip Code 211 W. EDINBURG, ELSA, TX 78543	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  FOOD/ BEVERAGE/ EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CAMPAIGN MEETING
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 11/4/15	Payee name CHARLIE'S MEAT MARKET	
Amount (\$) 56.00	Payee address; City; State; Zip Code 211 W. EDINBURG, ELSA, TX 78543	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  EVENT SPONSOR- RICK MEDRANO
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 11/5/2015	Payee name ALEX LOERA	
Amount (\$) 430.00	Payee address; City; State; Zip Code 1809 DOLEIGH ST., MERCEDES, TX 78570	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CUSTOM PAINTED SIGNS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/5/2015	<b>5</b> Payee name CARRERA COMMUNICATIONS	
<b>6</b> Amount (\$) 3000.00	<b>7</b> Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) CONSULTING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL CAMPAIGN CONSULTANT
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/6/15	Payee name BETO'S SCREEN PRINTING	
Amount (\$) 1461.38	Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  HIDALGO COUNTY HEADSTART TSHIRTS
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/6/15	Payee name BETO'S SCREEN PRINTING	
Amount (\$) 3869.94	Payee address; City; State; Zip Code 110 W. 4TH ST., SAN JUAN, TX 78589	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL SIGNS / MAGNETIC SIGNS
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 11/9/2015	<b>5</b> Payee name SELINA MEDRANO				
<b>6</b> Amount (\$) 1500.00	<b>7</b> Payee address; City; State; Zip Code 1303 PINE AVENUE, PHARR, TX 78577				
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL CAMPAIGN CONSULTANT			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 11/9/15	Payee name NATHAN GOWER SCHWARZ				
Amount (\$) 1000.00	Payee address; City; State; Zip Code 712 WALNUT, MCALLEN, TX 78504				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  DATA ANALYST			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 11/9/15	Payee name NANDIPATY FAMILY LIMITED PARTNERSHIP				
Amount (\$) 1250.00	Payee address; City; State; Zip Code 1620 E. 8TH ST., STE 1, WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  RENTAL EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  WESLACO HEADQUARTERS RENT			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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# POLITICAL EXPENDITURES MADE 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
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/10/15	<b>5</b> Payee name A.C. CUELLAR, III	
<b>6</b> Amount (\$) 4925.07	<b>7</b> Payee address; City; State; Zip Code 141 LION LAKE DR. SOUTH, PROGRESO LAKES, TX 78596	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) REIMBURSEMENT	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EE EVENT TAILGATE (339.55) ONLINE SHIRT ORDER (3030.21) EVENT KICKOFF (1215.24) FEES- HQ INSPECTION PERMIT (55.00) PRINT EXPENSE EMBROIDERY LOGO (285.07)
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	

Date 11/11/15	Payee name MARCO PEREZ	
Amount (\$) 297.03	Payee address; City; State; Zip Code 2008 W. JONQUIL, MCALLEN, TX 78501	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) REIMBURSEMENT	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  FOOD/ BEVERAGE & FUEL
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	

Date 11/11/15	Payee name KIMBERLY ROCHA	
Amount (\$) 981.00	Payee address; City; State; Zip Code 3533 CESSNA AVE, EDINBURG, TX 78542	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  GOTV
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 11/11/15	<b>5</b> Payee name HECTOR J HERNANDEZ				
<b>6</b> Amount (\$)  1728.00	<b>7</b> Payee address; City; State; Zip Code  905 W. 7TH STREET, WESLACO, TX 78596				
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  PRINTING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  SCREEN PRINT SERVICE (T-SHIRTS)			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 11/11/15	Payee name NYSSA M CRUZ				
Amount (\$)  1000.00	Payee address; City; State; Zip Code  PO BOX 1374, WESLACO, TX 78596				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  CONSULTING EXPENSE			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 11/11/15	Payee name PRINT WORKS				
Amount (\$)  781.02	Payee address; City; State; Zip Code  135 PASEO DEL PRADO, EDINBURG, TX 78542				
<b>PURPOSE OF EXPENDITURE</b>	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  KICK OFF PARTY INVITE AND FLYERS			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;"><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
<b>9</b> 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 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/12/15	<b>5</b> Payee name MID VALLEY TOWN CRIER	
<b>6</b> Amount (\$) 625.00	<b>7</b> Payee address; City; State; Zip Code PO BOX 3267, MCALLEN TX 78502	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  ADVERTISING EXPENSE	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  THANKSGIVING AD/ VETERANS SALUTE AD
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/13/15	Payee name CARRERA COMMUNICATIONS	
Amount (\$) 15000.00	Payee address; City; State; Zip Code 135 PASEO DEL PRADO, EDINBURG, TX 78542	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONSULTING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL CAMPAIGN CONSULTANT
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/13/15	Payee name JRG FOUNDATION	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 3609 E. RICHARDSON, EDINBURG, TX 78542	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  CONTRIBUTION/ DONATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  GOLF TOURNAENT/ SPONSOR
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES MADE 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Payee name ***SEE ATTACHED FOR REMAINING ***
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6 Amount (\$)	7 Payee address; City; State; Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

11/13/2015	LEO DIAZ	101 S. PLEASANTVIEW DR.	WESLACO	TX	78599	\$150.00	CONTRIBUTION/ DONATION	COCKOFF SPONSORSHIP
11/13/2015	HIDALGO COUNTY DEMOCRATIC PARTY	PO BOX 4885	MCALLEN	TX	78502	\$1,250.00	FEES	FILING FEES
11/16/2015	COPY RITE	120 S. WESTGATE DR.	WESLACO	TX	78596	\$3,000.00	PRINTING SERVICES	STICKERS/ FLYERS
11/19/2015	RIOS MEAT MARKET	505 W. SANTA ROSA	EDCOUCH	TX	78538	\$1,922.06	CONTRIBUTION/ DONATION	FOOD/ BEVERAGE
11/19/2015	MARCO PEREZ	2008 W. JONQUIL	MCALLEN	TX	78501	\$981.00	CONTRACT LABOR	BLOCKWALKING
11/19/2015	HECTOR J HERNANDEZ	905 W. 7TH STREET	WESLACO	TX	78596	\$216.00	PRINTING EXPENSE	SCREEN PRINT SERVICE- PINK TSHIRTS
11/24/2015	TEXAS VALLEY COMMUNITIES FOUNDATION	222 W UNIVERSITY DR.	EDINBURG	TX	78539	\$2,500.00	EVENT EXPENSE	HIDALGO COUNTY CHRISTMAS PARTY
11/24/2015	DIRECT ENERGY BUSINESS	1001 LIBERTY AVENUE	PITTSBURGH	PA	15222	\$199.05	OFFICE OVERHEAD	WESLACO HEADQUARTERS ELECTRICITY
11/24/2015	MARCO PEREZ	2008 W. JONQUIL	MCALLEN	TX	78501	\$981.00	CONTRACT LABOR	BLOCKWALKING
11/24/2015	OMAR FIGEROA	1618 E. 26TH ST	WESLACO	TX	78596	\$3,000.00	CONTRIBUTION/ DONATION	SPONSORSHIP
12/1/2015	MANDIPATY FAMILY LIMITED PARTNERSHIP	1620 E. 8TH ST., STE. 1	WESLACO	TX	78596	\$1,250.00	RENTAL EXPENSE	WESLACO HEADQUARTERS RENT
12/3/2015	SELINA MEDRANO	1303 PINE AVENUE	PHARR	TX	78577	\$1,649.60	REIMBURSEMENT	EVENT EXPENSE- CHRISTMAS PARTY
12/8/2015	KIMBERLY ROCHA	3533 CESSNA AVENUE	EDINBURG	TX	78542	\$1,417.00	CONTRACT LABOR	BLOCKWALKING
12/9/2015	ROMEO GARCIA	P.O. BOX 35	LINN	TX	78563	\$2,035.52	PRINTING EXPENSE	12 VINYL BANNERS
12/9/2015	GARRERA COMMUNICATIONS	135 PASEO DEL PRADO	EDINBURG	TX	78542	\$3,000.00	CONSULTING EXPENSE	POLITICAL CAMPAIGN CONSULTING
12/10/2015	CHARLES'S MEAT MARKET	211 W. EDINBURG	ELSA	TX	78543	\$299.80	FOOD/ BEVERAGE EXPENSE	CHRISTMAS PARTY
12/10/2015	CHARLES'S MEAT MARKET	211 W. EDINBURG	ELSA	TX	78543	\$235.70	CONTRIBUTION/ DONATION	HARGILL COCKOFF (199.70)
12/11/2015	MARCO PEREZ	2008 W. JONQUIL	MCALLEN	TX	78501	\$282.19	REIMBURSEMENT	MERCEDES COCKOFF (36.00)
12/15/2015	KIMBERLY ROCHA	3533 CESSNA AVENUE	EDINBURG	TX	78542	\$1,308.00	CONTRACT LABOR	FOOD/ BEVERAGE EXPENSE (BLOCKWALKERS)
12/16/2015	JOSE R. AYALA	6809 N. WESTGATE DR.	WESLACO	TX	78596	\$1,000.00	ADVERTISING EXPENSE	VIDEO RECORDINGS & EDITING
12/16/2015	BETOS SCREEN PRINTING	110 W. 4TH STREET	SAN JUAN	TX	78589	\$2,219.00	ADVERTISING EXPENSE	POLITICAL SIGNS
12/16/2015	DIRECT ENERGY BUSINESS	1001 LIBERTY AVENUE	PITTSBURGH	PA	15222	\$314.22	OFFICE OVERHEAD	WESLACO HEADQUARTERS ELECTRICITY
12/16/2015	ROLANDO GARCIA	PO BOX 1161	MERCEDES	TX	78570	\$500.00	CONTRIBUTION/ DONATION	MAKE A WISH FOUNDATION
12/18/2015	TEXAS CITRUS HESTA	220 EAST 9TH ST	MISSION	TX	78572	\$250.00	CONTRIBUTION/ DONATION	LYDIA M MONTOYA- SPONSOR
12/18/2015	HIDALGO COUNTY DEMOCRATIC PARTY	3307 N MCCOLL RD STE. D	MCALLEN	TX	78501	\$250.00	CONTRIBUTION/ DONATION	
12/18/2015	SELINA MEDRANO	1303 PINE AVENUE	PHARR	TX	78577	\$1,500.00	CONSULTING EXPENSE	CONSULTING SERVICES-JAN
12/18/2015	MID VALLEY TOWN CRIER	PO BOX 3267	MCALLEN	TX	78502	\$300.00	ADVERTISING EXPENSE	CHRISTMAS ADVERTISING
12/22/2015	PRINT WORKS	136 PASEO DEL PRADO	EDINBURG	TX	78542	\$11,297.00	PRINTING EXPENSE	FULL COLOR MAILERS
12/22/2015	MARCO PEREZ	2008 W. JONQUIL	MCALLEN	TX	78501	\$1,500.00	CONSULTING EXPENSE	FIELD CONSULTING/ MAP STUDIES
12/23/2015	DAVID RODRIGUEZ	PO BOX 2203	ELSA	TX	78543	\$674.47	REIMBURSEMENT	FOOD/ BEVERAGE (374.47) FUEL (300.00)

# 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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

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

**4** Date **5** Payee name  
8/11/15 ARTURO C. CUELLAR, JR. (A.C. CUELLAR, JR.)

**6** Amount (\$) **7** Payee address; City; State; Zip Code  
3419.72 231 LION LAKE DR S  
PROGRSO LAKES TX 78596  
 Reimbursement from political contributions intended

**8** **PURPOSE OF EXPENDITURE** **(a)** Category (See Categories listed at the top of this schedule) **(b)** Description  
REIMBURSEMENT  
 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 Payee name

Amount (\$) Payee address; City; State; Zip Code  
 Reimbursement from political contributions intended

**PURPOSE OF EXPENDITURE** Category (See Categories listed at the top of this schedule) **(b)** Description  
 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 Payee name

Amount (\$) Payee address; City; State; Zip Code  
 Reimbursement from political contributions intended

**PURPOSE OF EXPENDITURE** Category (See Categories listed at the top of this schedule) **(b)** Description  
 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