



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

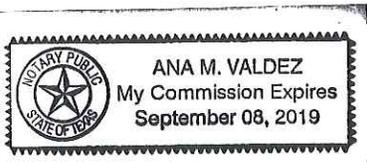
FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME	15 Filer ID (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	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

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,100. <sup>00</sup>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 6
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,380.41
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 7,068.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 17,000. <sup>00</sup>

**18 AFFIDAVIT**



AFFIX NOTARY STAMP / SEAL ABOVE

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.

*Marcos Ochoa*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Marcos Ochoa, this the 1st. day of February 16, to certify which, witness my hand and seal of office.

Ana M. Valdez      Ana M. Valdez      Notary  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Marcus Chen</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/15/16</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Larry Gallardo Jr. Campaign Fund</i> 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) <i>\$1000.00</i>
8 Principal occupation / Job title (See Instructions) <i>Hidalgo County Constable</i>		9 Employer (See Instructions) <i>Hidalgo County</i>
Date <i>1/19/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cabrillo Hernandez</i> Contributor address; City; State; Zip Code <i>1811 West Kuhn #1 Edinburg, TX 78541</i>	Amount of contribution (\$) <i>\$250.00</i>
Principal occupation / Job title (See Instructions) <i>Businessman</i>		Employer (See Instructions) <i>Owner</i>
Date <i>1/31/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rene Argaldea</i> Contributor address; City; State; Zip Code <i>P.O. Box 3658 Edinburg TX 78540</i>	Amount of contribution (\$) <i>\$1000.00</i>
Principal occupation / Job title (See Instructions) <i>Businessman</i>		Employer (See Instructions) <i>Owner</i>
Date <i>1/25/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Linares Auto Sales</i> Contributor address; City; State; Zip Code <i>P.O. Box 1732 McAllen TX 78501</i>	Amount of contribution (\$) <i>500.00</i>
Principal occupation / Job title (See Instructions) <i>Businessman</i>		Employer (See Instructions) <i>Owner</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Marcus Olson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/26/16</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John Welding &amp; Fabricators</i>	7 Amount of contribution (\$) <i>350.<sup>00</sup></i>
6 Contributor address; City; State; Zip Code <i>P.O. Box 1077 Perita TX 78576</i>		
8 Principal occupation / Job title (See Instructions) <i>Businessman Javier Cardenas</i>		9 Employer (See Instructions) <i>Owner</i>
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)

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

**LOANS**

**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <u>1</u>
2 FILER NAME <u>Maureen Ohon</u>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan <u>1/22/16</u>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <u>Maureen Ohon</u>	9 Loan Amount (\$) <u>7000.00</u>
6 Is lender a financial Institution?  Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code <u>P.O. Box 58 Penitas TX. 78526</u>	10 Interest rate <u>0</u>
		11 Maturity date <u>0</u>
12 Principal occupation / Job title (See Instructions) <u>Justice of Peace</u>		13 Employer (See Instructions) <u>Hidalgo County</u>
14 Description of Collateral <input type="checkbox"/> none <u>N/A</u>		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	17 Name of guarantor <u>N/A</u>	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code <u>N/A</u>	
20 Principal Occupation (See Instructions) <u>N/A</u>		21 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 <input type="radio"/> N	Lender address; City; State; Zip Code <u>N/A</u>	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none <u>N/A</u>		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor <u>N/A</u>	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code <u>N/A</u>	
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 FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>5</i>	<b>2</b> FILER NAME <i>Maura Ohn</i>	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date <i>1/4/16</i>	<b>5</b> Payee name <i>Facebook</i>				
<b>6</b> Amount (\$) <i>97.24</i>	<b>7</b> Payee address; City; State; Zip Code <i>1601 Willow Road Meno Park Ca. 94025</i>				
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <i>Facebook Ad.</i>	<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			
	<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 <i>1/6/15</i>	Payee name <i>Emique Ohn</i>				
Amount (\$) <i>60.<sup>00</sup></i>	Payee address; City; State; Zip Code <i>606 - South 18th St Pecos TX, 78576</i>				
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <i>Political Setting Up Sign</i>	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 <i>1/9/16</i>	Payee name <i>Malca's Restaurant</i>				
Amount (\$) <i>331.88</i>	Payee address; City; State; Zip Code <i>523 North 6th St. Mission Tx, 78572</i>				
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <i>Breakfast buffet.</i>	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 FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME <i>Marcus Obon</i>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <i>1/9/16</i>		<b>5</b> Payee name <i>Enrique Obon</i>			
<b>6</b> Amount (\$) <i>60.00</i>		<b>7</b> Payee address; City; State; Zip Code <i>606-South 18th St. Punita TX, 78526</i>			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <i>Putting up signs</i>		<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		
	Candidate / Officeholder name		Office sought	Office held	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <i>1/12/16</i>		Payee name <i>Alexandro Garcia - El Rincon Embroidery</i>			
Amount (\$) <i>200.00</i>		Payee address; City; State; Zip Code <i>1917 Sycamore 32 Street McAllen TX</i>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <i>T-shirts</i>		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Candidate / Officeholder name		Office sought	Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <i>1/18/16</i>		Payee name <i>Brando Garcia</i>			
Amount (\$) <i>6128.51</i>		Payee address; City; State; Zip Code <i>1500 Sycamore McAllen TX 78501</i>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <i>Inv # 1181</i>		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Candidate / Officeholder name <i>Campaign Material</i>		Office sought	Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Mauro Pilon</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>1/20/16</i>		5 Payee name <i>Enrique Pilon</i>			
6 Amount (\$) <i>\$80.00</i>		7 Payee address; City; State; Zip Code <i>606 South 18th St. Pecos TX. 78526</i>			
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule)  <i>Contract Labor</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought
Date <i>1/22/16</i>		Payee name <i>Bob Stark</i>			
Amount (\$) <i>200.00</i>		Payee address; City; State; Zip Code <i>2301 E. Griffin PKWY Mission TX. 78572</i>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)  <i>Mut Hunt-B.B.Q</i>		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought
Date <i>1/22/16</i>		Payee name <i>Blanca Garcia</i>			
Amount (\$) <i>800.00</i>		Payee address; City; State; Zip Code <i>39000 Old 4 mile Rd. Pecos TX. 78526</i>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)  <i>Contract Labor</i>		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

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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 <i>Maureen Oba</i>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <i>1/24/16</i>		<b>5</b> Payee name <i>Alexander Garcia</i>			
<b>6</b> Amount (\$) <i>390.00</i> <input type="checkbox"/> Expenditure from corporate funds		<b>7</b> Payee address; City; State; Zip Code <i>1917 Sycamore 32<sup>nd</sup> Street McAllen TX</i>			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>T-shirt Campaign</i>		<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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
<b>Date</b> <i>1/24/16</i>		<b>Payee name</b> <i>Mike Curran Communications</i>			
<b>Amount (\$)</b> <i>\$5800.00</i> <input type="checkbox"/> Expenditure from corporate funds		<b>Payee address; City; State; Zip Code</b> <i>135 Paseo del Prado Edingburg</i>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) <i>Marketing</i>		<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
<b>Date</b> <i>1/24/16</i>		<b>Payee name</b> <i>Brand Boosters</i>			
<b>Amount (\$)</b> <i>2029.69</i> <input type="checkbox"/> Expenditure from corporate funds		<b>Payee address; City; State; Zip Code</b> <i>3607 S.L. Lane McAllen TX. 78503</i>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) <i>Campaign Material</i>		<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date <i>1/26/16</i>	5 Payee name <i>Elda Garcia</i>
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6 Amount (\$) <i>\$1000.00</i>	7 Payee address; City; State; Zip Code <i>1108 Finches St. Mission TX, 78572</i>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <i>Contract Labor.</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 <i>1/26/16</i>	Payee name <i>Felipe Garcia</i>
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Amount (\$) <i>750.00</i>	Payee address; City; State; Zip Code <i>201 E. University Dr. Edingburg TX, 78539</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertisement trailers Labor and Expenses</i>	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 <i>1/27/16</i>	Payee name <i>Exclusive Design</i>
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Amount (\$) <i>250.00</i>	Payee address; City; State; Zip Code <i>1901 Magnolia St 2 1/2 mile North La Home. Mission TX 78573</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Cape</i>	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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