

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed: <div style="font-size: 2em; text-align: center;">8</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI <div style="text-align: center; font-size: 1.2em;">Gustavo C.</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Ruiz</div>	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em;">1514 Karis Ct. Harlingen TX 78550</div>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em;">(956) 792-0399</div>	Receipt #	Amount
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI <div style="text-align: center; font-size: 1.2em;">Cesar</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Morales</div>	Date Received Date Hand Delivered or Date Postmarked Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em;">1729 Peachtree Court Harlingen TX 78550</div>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em;">(956) 423-3114</div>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <div style="font-size: 1.2em;">03 / 06 / 2010 THROUGH 03 / 29 / 2010</div>		
11 ELECTION	ELECTION DATE Month Day Year <div style="font-size: 1.2em;">05 / 08 / 2010</div>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <div style="font-size: 1.5em; text-align: center;">N/A</div>	13 OFFICE SOUGHT (if known) <div style="font-size: 1.2em;">Commissioner District #1</div>	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. .. Name Address / PO Box; Apt. / Suite #; City; State; Zip Code		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME _____ **16 ACCOUNT # (Ethics Commission Filers)** _____

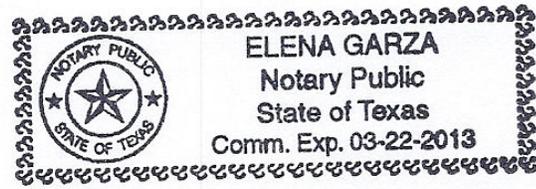
17 NOTICE FROM POLITICAL COMMITTEE(S)

** 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 checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		Gustavo C. Ruiz Campaign
		COMMITTEE ADDRESS
		1514 Karis Ct. Harlingen TX 78550
	COMMITTEE CAMPAIGN TREASURER NAME	Cesar Morales
	COMMITTEE CAMPAIGN TREASURER ADDRESS	1729 Peachtree Court Harlingen TX 78550

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1,010.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,760.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,514.26
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 245.74
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

19 AFFIDAVIT



ELENA GARZA
Notary Public
State of Texas
Comm. Exp. 03-22-2013

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.

Gustavo C Ruiz
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gustavo C. Ruiz, this the 7th day of April, 2019, to certify which, witness my hand and seal of office.

Elena Garza Elena Garza Asst City Sec.
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Gustavo C. Ruiz		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/6/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Federico Lopez III	7 Amount of contribution (\$) \$ 200	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 17294 Taylor Rd. Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Business		10 Employer (See Instructions)	
Date 3/6/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Federico Lopez Jr.	Amount of contribution (\$) \$ 200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 413 W. Harrison Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions)	
Date 3/8/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Sanchez	Amount of contribution (\$) \$ 100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 501 E. Tylan Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)	
Date 3/8/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alejandra Sanchez	Amount of contribution (\$) \$ 100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 501 E. Tylan Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/8/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonnie Davis	Amount of contribution (\$) \$ 100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2314 Ann Arbor Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions)	

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Gustavo C. Ruiz		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/9/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Garcia	7 Amount of contribution (\$) \$ 200	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2014 E. Austin Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions)	
Date 3/9/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Ganza	Amount of contribution (\$) \$ 500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 23929 Rabb Rd. San Benito TX 78586		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions)	
Date 3/14/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Gonzales II	Amount of contribution (\$) \$ 250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2022 Plantation Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 3/14/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Perez	Amount of contribution (\$) \$ 100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2706 N. Rose Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Border Patrol		Employer (See Instructions)	
Date 3/14/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedro Olivarez	Amount of contribution (\$) \$ 200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 26596 Rd. 564 San Benito TX 78586		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Gustavo C. Ruiz		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/14/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Evinger	7 Amount of contribution (\$) \$100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 855 E. Hamison st. Brownsville TX 78520		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions)	
Date 3/14/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1514 Kanis Ct. Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)	
Date 3/18/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1514 Kanis Ct. Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)	
Date 3/17/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward Nino	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. BOX 531449 Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)	
Date 3/22/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacinto Garza	Amount of contribution (\$) \$1000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 27304 S. Bass Blvd Harlingen TX 78550		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

4

2 FILER NAME

Gustavo C. Ruiz

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/25/10

5 Full name of contributor out-of-state PAC (ID#: _____)

Gustavo C. Ruiz

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

\$100

6 Contributor address; City; State; Zip Code

1514 Kanis Ct.
Harlingen TX 78550

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Date

3/29/10

Full name of contributor out-of-state PAC (ID#: _____)

Roger Youngblood

Amount of contribution (\$)

\$200

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1001 S. Ed. Carey Dr.
Harlingen TX 78550

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Business

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Gustavo C. Ruiz

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/8/10

5 Payee name

MS Designs

7 Amount (\$)

\$750

6 Payee address; City; State; Zip Code

424 W. Harrison
Harlingen TX 78550

8 Purpose of payment (See instructions regarding type of information required.)

Campaign Material

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

3/14/10

Payee name

Chapitas

Amount (\$)

\$350

Payee address; City; State; Zip Code

1635 N. 77 Sunshine strip
Harlingen TX 78550

Purpose of payment (See instructions regarding type of information required.)

Campaign Dinner

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

3/18/10

Payee name

MS Designs

Amount (\$)

\$1,704.57

Payee address; City; State; Zip Code

424 W. Harrison
Harlingen TX 78550

Purpose of payment (See instructions regarding type of information required.)

Campaign Material

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

3/18/10

Payee name

Jesse James

Amount (\$)

\$100

Payee address; City; State; Zip Code

806 E. Washington
Harlingen TX 78550

Purpose of payment (See instructions regarding type of information required.)

Campaign Labor

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:

2 FILER NAME *Gustavo C. Ruiz* 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
<i>3/19/10</i>	<i>M5 Designs</i>	<i>\$564.25</i>
6 Payee address; City; State; Zip Code		
<i>424 W. Harrison Harlingen TX 78550</i>		

8 Purpose of payment (See instructions regarding type of information required.) <i>Campaign material</i> <small>(If travel outside of Texas, complete Schedule T)</small>	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
<i>3/23/10</i>	<i>Edu Care ABS</i>	<i>\$300</i>
Payee address; City; State; Zip Code		
<i>1401. N. 28th St. Harlingen TX 78550</i>		

Purpose of payment (See instructions regarding type of information required.) <i>Campaign T-shirts</i> <small>(If travel outside of Texas, complete Schedule T)</small>	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
<i>3/25/10</i>	<i>Jesse James</i>	<i>\$100</i>
Payee address; City; State; Zip Code		
<i>806 E. Washington Harlingen TX 78550</i>		

Purpose of payment (See instructions regarding type of information required.) <i>Campaign Labor</i> <small>(If travel outside of Texas, complete Schedule T)</small>	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
<i>3/26/10</i>	<i>M-5 Designs</i>	<i>\$645.44</i>
Payee address; City; State; Zip Code		
<i>424 W. Harrison Harlingen TX 78550</i>		

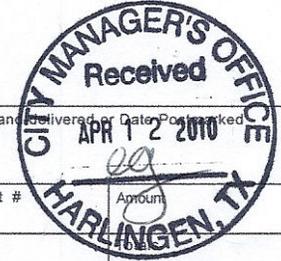
Purpose of payment (See instructions regarding type of information required.) <i>Campaign Material</i> <small>(If travel outside of Texas, complete Schedule T)</small>	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

FORM COR-C/OH

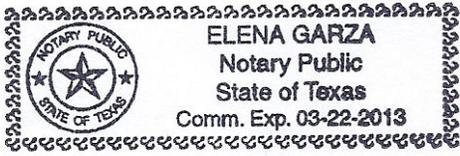
CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #		2 Total pages filed: 4		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME Gustavo C. Ruiz		MS / MRS / MR	FIRST Gustavo	MI C.	Date Received
NICKNAME		LAST Ruiz		SUFFIX	
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	
		<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Date Hand Delivered or Date Postmarked
		<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Receipt #
		<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report		Legal
5 ORIGINAL PERIOD COVERED		Month Day Year	THROUGH	Month Day Year	Date Processed
		03 / 06 / 10		03 / 29 / 10	Date Imaged



6 EXPLANATION OF CORRECTION I need to correct cover sheet p.2, Line 18-2, to subtract the in kind contributions that I made. Then I need to correct schedule A to reflect the subtraction of my in kind contributions (2). Then I need to include Schedule E to reflect my political expenditures made from personal funds. Also, I will be leaving ~~to~~ Line # 17 blank on ~~Schedule~~ Cover sheet p.2 because I do not have any political committees. Also, including new figures on Line 18-5 to reflect change of balance.

7 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.



Check ONLY if applicable:

I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Gustavo C. Ruiz

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Gustavo C Ruiz this the 12th day of April

20 10, to certify which, witness my hand and seal of office.

Signature of officer administering oath: Elena Garza Printed name of officer administering oath: Elena Garza Title of officer administering oath: Notary Public

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Gustavo C Ruiz 16 ACCOUNT # (Ethics Commission Filers)

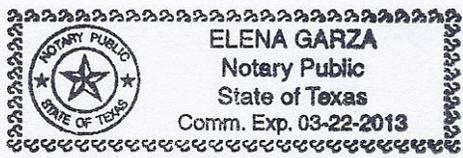
17 NOTICE FROM POLITICAL COMMITTEE(S)

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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1,010.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,560.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,514.26
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 45.74
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 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.

Gustavo C. Ruiz
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Gustavo C Ruiz, this the 12th day of April, 2010, to certify which, witness my hand and seal of office.

<u>Elena Garza</u> Signature of officer administering oath	<u>Elena Garza</u> Printed name of officer administering oath	<u>Notary Public</u> Title of officer administering oath
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

3

2 FILER NAME

Gustavo C. Ruiz

3 ACCOUNT # (Ethics Commission filers)

4 Date
3/14/10

5 Full name of contributor out-of-state PAC (ID#: _____)
John Evinger

7 Amount of contribution (\$)
\$100

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
855 E. Hamison St.
Brownsville TX 78520

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Date
3/14/10

Full name of contributor out-of-state PAC (ID#: _____)
Gustavo C. Ruiz

Amount of contribution (\$)
\$100

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1514 Kanis Ct.
Harlingen TX 78550

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Date
3/17/10

Full name of contributor out-of-state PAC (ID#: _____)
Edward Nino

Amount of contribution (\$)
\$200

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
P.O. Box 531449
Harlingen TX 78550

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Insurance Agent

Employer (See Instructions)

Date
3/22/10

Full name of contributor out-of-state PAC (ID#: _____)
Jacinto Garza

Amount of contribution (\$)
\$1000

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
27304 S. Bass Blvd.
Harlingen TX 78550

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Date
3/29/10

Full name of contributor out-of-state PAC (ID#: _____)
Roger Youngblood

Amount of contribution (\$)
\$200

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1001 S. Ed. Carey Dr.
Harlingen TX 78550

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Business

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The Instruction Guide explains how to complete this form. 1 Total pages Schedule G:
1

2 FILER NAME *Gustaw C. Ruiz* 3 ACCOUNT # (Ethics Commission filers)

4 Date <i>3/18/10</i>	5 Payee name <i>Jesse James</i>	8 Amount (\$) <i>\$100</i>
6 Payee address; City; State; Zip Code <i>806 E. Washington Hanlingen TX 78550</i>		<input type="checkbox"/> Reimbursement from political contributions intended
7 Purpose of expenditure (See instructions regarding type of information required.) <i>campaign labor</i> <small>(If travel outside of Texas, complete Schedule T)</small>		

Date <i>3/25/10</i>	Payee name <i>Jesse James</i>	Amount (\$) <i>\$100</i>
Payee address; City; State; Zip Code <i>806 E. Washington Hanlingen TX 78550</i>		<input type="checkbox"/> Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) <i>campaign labor</i> <small>(If travel outside of Texas, complete Schedule T)</small>		

Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		<input type="checkbox"/> Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) <small>(If travel outside of Texas, complete Schedule T)</small>		

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Payee address; City; State; Zip Code		<input type="checkbox"/> Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) <small>(If travel outside of Texas, complete Schedule T)</small>		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED