

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)
00000001

2 PAGE #
1 of 11

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS / MRS / MR

Mr.

FIRST

Victor

MI

NICKNAME

LAST

Leal

SUFFIX

OFFICE USE ONLY

Date Received

CITY SECRETARY'S OFFICE
Received
DEC 13 2012
all 4:40 P.M.

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

2225 W Arbor
Harlingen, TX 78552
 Change of Address

Date Hand-Delivered or Date Postmarked

Receipt #

Amount

**5 CAMPAIGN
TREASURER
NAME**

MS / MRS / MR

Ms.

FIRST

Maria

MI

NICKNAME

LAST

DeFord

SUFFIX

Date Processed

Date Imaged

**6 CAMPAIGN
TREASURER
ADDRESS**
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

28288 Bass Blvd
Harlingen, TX 78552
**7 CAMPAIGN
TREASURER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(956) 970-0327

8 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer
appointment (officeholder only)

July 15

8th day before election

Exceeded \$500 limit

Final report (Attach C/OH - FR)

**9 PERIOD
COVERED**

Month

Day

Year

Month

Day

Year

THROUGH

10/28/2012

12/11/2012

10 ELECTION

ELECTION DATE

Month

Day

Year

12/21/2012

ELECTION TYPE

Primary

Runoff

General

Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)
Harlingen City Commissioner
District 5
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Leal, Victor (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

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

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 175.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 4,050.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 6,154.73

CONTRIBUTION BALANCE

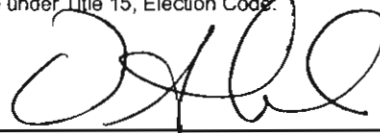
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 2,000.00

17 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.



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said VICTOR LEAL, this the 13th day of Dec., 2012, to certify which, witness my hand and seal of office.

Amanda C. Elizondo Amanda C. Elizondo City Secy

Signature of officer administering oath

Print 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 PAGE # Schedule: 1/5 Report: 3/11		
2 FILER NAME Leal, Victor (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date 11/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allen, Julie Uhlhorn	6 Contributor address; City; State; Zip Code 2601 S 77 Sunshine St Harlingen, TX 78550	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 11/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allex, David	Contributor address; City; State; Zip Code P.O.Box 531180 Harlingen, TX 78553	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bhakta, Arun	Contributor address; City; State; Zip Code 4401 S Expressway 83 Harlingen, TX 78550	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Broyles, Sidney	Contributor address; City; State; Zip Code 1302 Maple Ct Harlingen, TX 78550	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 11/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campbell, Scot	Contributor address; City; State; Zip Code 1210 E Tyler Harlingen, TX 78550	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 2/5 Report: 4/11
2 FILER NAME Leal, Victor (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 11/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cleckler, Jo Ann 6 Contributor address; City; State; Zip Code 3109 Cobblestone Harlingen, TX 78550	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 10/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cruz, Orlando Contributor address; City; State; Zip Code 5105 N 1st Ln McAllen, TX 78504	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 11/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cruz, Orlando Contributor address; City; State; Zip Code 5105 N 1st Ln McAllen, TX 78504	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 11/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dubea, Kemp Contributor address; City; State; Zip Code 5602 Spicewood Harlingen, TX 78552	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Franks, L R Contributor address; City; State; Zip Code 509 Lake Dr Harlingen, TX 78550	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 5/11	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 11/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hall, Gordon 6 Contributor address; City; State; Zip Code 6245 Malcom Dr Dallas, TX 75214	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hawkins, E L 6 Contributor address; City; State; Zip Code 333 Parkview Cr Harlingen, TX 78550	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keim, Larry 6 Contributor address; City; State; Zip Code 1327 E Washington Harlingen, TX 78550	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kornegay, Clyde 6 Contributor address; City; State; Zip Code 190 Palma Del Lago Cr San Benito, TX 78586	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 11/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kornegay, Patrick 6 Contributor address; City; State; Zip Code 28125 Norma Linda Rd San Benito, TX 78586	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/5 Report: 6/11	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 11/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, John <hr/> 6 Contributor address; City; State; Zip Code 222 E Austin Ave Harlingen, TX 78550	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scaief, Michael <hr/> Contributor address; City; State; Zip Code P.O.Box 1064 San Benito, TX 78586	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Silva, Esequivel <hr/> Contributor address; City; State; Zip Code 5669 Wild Bird Ln Brownsville, TX 78526	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Topp, John <hr/> Contributor address; City; State; Zip Code 1117 N Stuart Place rd Harlingen, TX 78552	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Discount on Invoice
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Uhlhorn, Martha <hr/> Contributor address; City; State; Zip Code 2601 S Hwy 77 Harlingen, TX 78550	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/5 Report: 7/11	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 11/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Uhlhorn, Tudor 6 Contributor address; City; State; Zip Code 2601 S 77 Sunshine St Harlingen, TX 78550	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
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Date 11/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walsh, Mary Jane Contributor address; City; State; Zip Code 609 Atlas Palmas Rd Harlingen, TX 78552	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 10/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Joe Contributor address; City; State; Zip Code 1805 Walnut Ct Harlingen, TX 78550	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/2 Report: 8/11		2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 11/02/2012		5 Payee name Consiglio, Nick (Mr.)			
6 Amount (\$) \$100.00		7 Payee address City; State; Zip Code 1721 Mourning Dove Harlingen, TX 78550			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Help	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/29/2012		Payee name Golden Palms			
Amount (\$) \$110.42		Payee address City; State; Zip Code 2101 Treasure Hills Blvd Harlingen, TX 78550			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Reception	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/29/2012		Payee name Meade Marketing			
Amount (\$) \$1,300.00		Payee address City; State; Zip Code 211 W Jefferson Ste 7 Harlingen, TX 78550			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Outdoor Sign	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/03/2012		Payee name Rosalez, Abel (Mr.)			
Amount (\$) \$250.00		Payee address City; State; Zip Code 16282 Wilson Rd Harlingen, TX 78550			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Help	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/2 Report: 9/11	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 11/29/2012	5 Payee name St. George
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6 Amount (\$) \$52.50	7 Payee address 704 W. Sam Houston Pharr, TX 78577	City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Reception
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/06/2012	Payee name Topp Marketing
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Amount (\$) \$3,542.50	Payee address 1117 N Stuart Place Rd Harlingen, TX 78552	City; State; Zip Code
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9 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Direct Mail
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Raimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/2 Report: 10/11	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 11/03/2012	5 Payee name Blanquitas
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6 Amount (\$) \$20.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 3501 W Business 83 Harlingen, TX 78552
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Breakfast for Campaign Help
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Date 11/14/2012	Payee name Blanquitas
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Amount (\$) \$23.22 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3501 W Business 83 Harlingen, TX 78552
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> lunch for campaign workers
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Date 11/24/2012	Payee name Blanquitas
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Amount (\$) \$29.87 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3501 W Business 83 Harlingen, TX 78552
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lunch for Help
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Date 11/05/2012	Payee name Feldman's
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Amount (\$) \$155.11 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 621 S 77 Sunshine Strip Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Refreshments
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/2 Report: 11/11	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 11/03/2012	5 Payee name Ol'd's Soda Shop
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6 Amount (\$) \$32.44 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 105 W Jackson Harlingen, TX 78550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lunch for Help
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Date 11/03/2012	Payee name Stripes #9112
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Amount (\$) \$15.27 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1826 W Tyler Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Drinks and Ice
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Date 11/13/2012	Payee name USPO
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Amount (\$) \$31.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 709 W 77 Sunshine Strip Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - postage	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps
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Date 11/29/2012	Payee name Valley Prints
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Amount (\$) \$491.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1908 Tanglewood Brownsville, TX 78521
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard Signs
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