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: 6

OFFICE USE ONLY
Date Received
CITY SECRETARY'S OFFICE Received APR 30 2015 at 4:18 P.M. HARLINGEN
Date Hand-Delivered or Postmarked
Receipt # | Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: ∅ FIRST: Jose MI:
NICKNAME: Joe LAST: Rubio SUFFIX: JR.

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2309 Hacienda Road
Harlingen, TX 78552

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (956) PHONE NUMBER: 536-6575 EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR FIRST MI
SAME AS CANDIDATE
NICKNAME LAST SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
SAME AS CANDIDATE

8 CAMPAIGN TREASURER PHONE
AREA CODE: (956) PHONE NUMBER: 536-6575 EXTENSION:
CANDIDATE'S PHONE #

9 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)

10 PERIOD COVERED
Month Day Year: 04/01/2015 THROUGH Month Day Year: 04/30/2015

11 ELECTION
ELECTION DATE Month Day Year: 05/09/2015
ELECTION TYPE ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE
OFFICE HELD (if any): NONE

13 OFFICE SOUGHT (if known): Harlingen City Commissioner, District #3

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Jose Rubio Jr.

15 ACCOUNT # (Ethics Commission Filers):

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME: -NA-

COMMITTEE ADDRESS:

COMMITTEE CAMPAIGN TREASURER NAME:

COMMITTEE CAMPAIGN TREASURER ADDRESS:

☐ additional pages

17 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ Ø
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 1,000.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ see line 3 ~~766.11~~
	4. **TOTAL POLITICAL EXPENDITURES**	$ 766.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 233.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 200.00

18 AFFIDAVIT

AMANDA C. ELIZONDO
MY COMMISSION EXPIRES
July 30, 2015

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 Joe Rubio, this the 30th day of April, 20 15, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Amanda C. Elizondo	Amanda C. Elizondo	City Secy

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 1

2 FILER NAME: Jose Rubio Jr.

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4-23-2015	Ernesto Silva 1118 S D ST Harlingen, TX 78552	$200.00	-NA-

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Consultant

10 Employer (See Instructions): Self-employed

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-24-2015	Humberto Zamora 1014 E Harrison Harlingen, TX 78550	$200.00	-NA-

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): business developer

Employer (See Instructions): Self-employed

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-20-2015	Heriberto Medrano 2009 E. Harrison, Suite B Harlingen TX 78552	$500	-NA-

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions): Self-employed

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-30-2015	Dennis M. Zammarron 2019 E Washington Harlingen, TX 78550	$100.00	Ø

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Retired

Employer (See Instructions): -NA-

Date	Full name of contributor / 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 SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
(P1) 2	Jose Rubio Jr.	

4 Date	5 Payee name
4-21-2015	MP5 Designs

6 Amount ($)	7 Payee address; City; State; Zip Code
$218.64	405 S. Palm Court Drive Harlingen TX 78552

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	4'x4' signs ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
4-24-15	Sam's Club

Amount ($)	Payee address; City; State; Zip Code
$146.[illegible]	621 N Exp 77 Harlingen TX 78550

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	HP Printer for push cards & flyers ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
4-24-15	Sam's Club

Amount ($)	Payee address; City; State; Zip Code
$72.51	621 N Expressway 77 Harlingen TX 78550

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	HP 950 XL ink cartridges ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
4-24-15	Sam's Wholesale Club

Amount ($)	Payee address; City; State; Zip Code
$24.27	621 N Expressway 77 Harlingen, TX 78550

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Card stock paper for push cards ☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: (R2) 2	2 FILER NAME Jose Rubio JR	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4-26-15	5 Payee name SAM's Club	
6 Amount ($) $22.69	7 Payee address; City; State; Zip Code 621 N Exp 77 Harlingen, TX 78550	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Stapler/staples/paper ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name NA-	Office sought / Office held

Date 4-22-2015	Payee name STRIPS #9112	
Amount ($) $32	Payee address; City; State; Zip Code 1826 W Tyler Harlingen TX 78552	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) TRAVEL in District	Description (If travel outside of Texas, complete Schedule T) Gas Expenses ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name NA-	Office sought / Office held

Date 4-30-15	Payee name Senovio Muñiz	
Amount ($) $250	Payee address; City; State; Zip Code 207 N 0st Harlingen TX 78552	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Sign posting & printing help of push cards ☑ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name NA	Office sought NA / Office held

Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME: Jesse Rubio JR.

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $ 200.00

5 Date of loan: 4-22-15

6 Is lender a financial institution? Y N

7 Name of lender: (Self) Jesse Rubio JR.

☐ out-of-state PAC (ID#:)

8 Lender address; City; State; Zip Code: 2309 Hacienda Road Harlingen TX 78552

9 Loan Amount ($): 200.00

10 Interest rate: Ø

11 Maturity date: Ø NA

12 Principal occupation / Job title (See Instructions): (Self) semi-Retired

13 Employer (See Instructions): RGV Private Investigations Mark

14 Description of Collateral: ☑ none

15 Check if personal funds were deposited into political account: ☑

16 GUARANTOR INFORMATION: ☐ 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

Name of lender

☐ 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: ☐ none

Check if personal funds were deposited into political account: ☐

GUARANTOR INFORMATION: ☐ 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.