

# 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
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; 2225 W Arbor Harlingen, TX 78552	APT / SUITE #;	CITY; STATE; ZIP CODE
	Date Received <b>RECEIVED</b> JAN 11 2013 ac CITY SECRETARY'S OFFICE HARLINGEN, TX		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Maria	MI
	NICKNAME	LAST DeFord	SUFFIX
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 (956)	PHONE NUMBER 970-0327	EXTENSION
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input 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)		
9 PERIOD COVERED	Month    Day    Year 12/12/2012	THROUGH Month    Day    Year 01/10/2013	
10 ELECTION	ELECTION DATE Month    Day    Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any) Harlingen City Commissioner District 5		12 OFFICE SOUGHT (if known)
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. ..

<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

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 5,166.00

EXPENDITURE TOTALS

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

4. TOTAL POLITICAL EXPENDITURES \$ 5,434.37

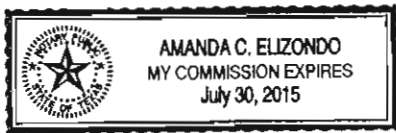
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 319.24

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

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.

*[Handwritten Signature]*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Victor Leal, this the 11<sup>th</sup> day of JAN., 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 <b>INSTRUCTION GUIDE</b> explains how to complete this form.		1 PAGE # Schedule: 1/7 Report: 3/11	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  01/03/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Argullin, Frank  6 Contributor address; City; State; Zip Code 26334 FM 803 San Benito, TX 78586	7 Amount of contribution (\$)  \$300.00	8 In-kind contribution description (if applicable) Use of Trailer for Campaign Signs  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boggus, Frank  Contributor address; City; State; Zip Code P.O.Box 1111 Harlingen, TX 78550	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  12/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bonner, Curtis  Contributor address; City; State; Zip Code P.O.Box 288 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)	
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cantu, Blas  Contributor address; City; State; Zip Code 1408 Pine Ct 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)	
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chidester, Willie D  Contributor address; City; State; Zip Code 2202 Treasure Hills Blvd 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 <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 2/7 Report: 4/11	
<b>2</b> FILER NAME Leal, Victor (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date  12/15/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cocke, Jim R  <b>6</b> Contributor address; City; State; Zip Code P.O.Box 531805 Harlingen, TX 78553	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooley, Edward  Contributor address; City; State; Zip Code 146 El Cielo Cr Harlingen, TX 78552	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  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cruz, Carmen  Contributor address; City; State; Zip Code 1353 Northshore San Benito, TX 78586	Amount of contribution (\$)  \$300.00	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  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dela Garza, Lisa  Contributor address; City; State; Zip Code 2814 Lotus St 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  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Robert  Contributor address; City; State; Zip Code P.O.Box 570 Rio Hondo, TX 78583	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 <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 3/7 Report: 5/11	
<b>2</b> FILER NAME Leal, Victor (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date  12/21/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliff, Larry  <b>6</b> Contributor address; City; State; Zip Code 1307 W Harrison Ave Harlingen, TX 78550	<b>7</b> Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  12/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliff, Merrilllee  Contributor address; City; State; Zip Code 169 S Nueces Park Harlingen, TX 78552	Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Engeling, Floyd  Contributor address; City; State; Zip Code 1136 Fairway Harlingen, TX 78552	Amount of contribution (\$)  \$200.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ewers, Ruthie  Contributor address; City; State; Zip Code 138 Palm Valley Dr W Harlingen, TX 78552	Amount of contribution (\$)  \$316.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable) Election Night Reception
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flinn, Owen  Contributor address; City; State; Zip Code P.O.Box 2245 Harlingen, TX 78551	Amount of contribution (\$)  \$50.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
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: 4/7 Report: 6/11	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/15/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Franks, L R  6 Contributor address; City; State; Zip Code 509 Lake Dr Harlingen, TX 78550	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gorges, Matt  Contributor address; City; State; Zip Code 1275 N Stuart Place Rd Harlingen, TX 78552	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hubbard, Bill  Contributor address; City; State; Zip Code 1113 Xanthisma Ave McAllen, TX 78504	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  12/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jom, William  Contributor address; City; State; Zip Code 153 S Nueces Park Harlingen, TX 78552	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date  12/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Medrano, Heriberto  Contributor address; City; State; Zip Code 2009 E Harrison Ave - Ste B Harlingen, TX 78550	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 5/7 Report: 7/11	
<b>2</b> FILER NAME Leal, Victor (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date 12/15/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Dennis  <b>6</b> Contributor address; City; State; Zip Code 2905 Cypress Dr Harlingen, TX 78550	<b>7</b> Amount of contribution (\$) \$100.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date 12/21/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphy, Michael  <b>6</b> Contributor address; City; State; Zip Code 1102 Ferguson Dr Harlingen, TX 78550	<b>7</b> Amount of contribution (\$) \$100.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date 12/15/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pratt, Mark  <b>6</b> Contributor address; City; State; Zip Code 1202 E Tyler Harlingen, TX 78550	<b>7</b> Amount of contribution (\$) \$50.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date 12/21/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Cindy  <b>6</b> Contributor address; City; State; Zip Code 117 Wildwood Ave Harlingen, TX 78550	<b>7</b> Amount of contribution (\$) \$50.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>4</b> Date 12/21/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepard, Robert W  <b>6</b> Contributor address; City; State; Zip Code 5348 Papaya Cr Harlingen, TX 78552	<b>7</b> Amount of contribution (\$) \$100.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 6/7 Report: 8/11	
<b>2</b> FILER NAME Leal, Victor (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date  12/15/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shields, M Allen <hr/> <b>6</b> Contributor address; City; State; Zip Code 24973 N White Ranch Rd La Feria, TX 78559	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  12/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simmons, Leonard P <hr/> Contributor address; City; State; Zip Code 19573 Simmons Rd San Benito, TX 78586	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vento, Bob <hr/> Contributor address; City; State; Zip Code 118 Mae Dr San Benito, TX 78586	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Villarreal, Victor <hr/> Contributor address; City; State; Zip Code 16156 Weston Way Harlingen, TX 78552	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vittitoe, Craig <hr/> Contributor address; City; State; Zip Code 2810 Becky Ln Harlingen, TX 78550	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 7/7 Report: 9/11	
<b>2</b> FILER NAME Leal, Victor (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date 12/15/2012	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) West, Harriette  <b>6</b> Contributor address; City; State; Zip Code 121 W Sunflower Ave McAllen, TX 78504	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date 12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Joe  Contributor address; City; State; Zip Code 1605 Walnut Ct Harlingen, TX 78550	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date 12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wolf, Bert  Contributor address; City; State; Zip Code 1101 Ferguson Harlingen, TX 78550	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date 01/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wyrick, Jan  Contributor address; City; State; Zip Code 28449 S Palm Court Dr Harlingen, TX 78552	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date 12/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Youngblood, William  Contributor address; City; State; Zip Code 534 Lake Dr Harlingen, TX 78550	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	

**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.

<b>1</b> PAGE # Schedule: 1/1 Report: 10/11	<b>2</b> FILER NAME Leal, Victor (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00000001
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<b>4</b> Date 01/10/2013	<b>5</b> Payee name Leal, Victor (Mr.)
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<b>6</b> Amount (\$) \$1,327.97	<b>7</b> Payee address City; State; Zip Code 2225 W Arbor Harlingen, TX 78552
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursement of Out of Pocket Expenses
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/10/2013	Payee name Leal, Victor (Mr.)
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Amount (\$) \$2,000.00	Payee address City; State; Zip Code 2225 W Arbor Harlingen, TX 78552
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Loan Repayment
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/19/2012	Payee name Meade Marketing
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Amount (\$) \$2,095.64	Payee address City; State; Zip Code 211 W Jefferson Ste 7 Harlingen, TX 78550
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Newsprint and Signs
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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/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.

<b>1</b> PAGE # Schedule: 1/1 Report: 11/11		<b>2</b> FILER NAME Leal, Victor (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00000001	
<b>4</b> Date 12/24/2012		<b>5</b> Payee name Walmart			
<b>6</b> Amount (\$) \$10.76		<b>7</b> Payee address City; State; Zip Code 1801 W Lincoln Harlingen, TX 78552			
<input checked="" type="checkbox"/> Reimbursement from political contributions intended					
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Thank You Cards	