

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #	00000001	2 PAGE #	1 of 22
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3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Victor	MI	OFFICE USE ONLY		
	NICKNAME	LAST Leal	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				
	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)				
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report				
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	07/01/2012		THROUGH		09/27/2012	
	Legal	Totals				
	Date Processed	Date Imaged				

CITY SECRETARY'S OFFICE
Received
 OCT 29 2012
ace
HARLINGEN, TX

6 EXPLANATION OF CORRECTION
 An Expenditure to Meade Marketing on 9/7/2012 was overstated by \$54.00. The amount reported was \$4682.56, the correct amount was \$4628.56. This is to correct the error.

7 AFFIDAVIT

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

Check ONLY if applicable:

Semiannual reports: This report is an amendment/correction to a semi-annual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports (excluding semiannual reports): 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.



Signature of Candidate or Officeholder
[Signature]

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by VICTOR LEAL this the 29 day of October, 2012, to certify which, witness my hand and seal of office.

Kelly A. Miller Kelly A. Miller
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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

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 #
2 of 22

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Victor	MI MI
	NICKNAME	LAST Leal	SUFFIX

OFFICE USE ONLY

Date Received: **OCT 29 2012**
au

CITY SECRETARY'S OFFICE
HARLINGEN, TX

Date Hand-delivered or Date Postmarked

Receipt #	Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE
	2225 W Arbor Harlingen, TX 78552				

Change of Address

5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Maria	MI 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	PHONE NUMBER	EXTENSION
	(956) 970-0327		

8 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)

9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	07/01/2012			09/27/2012			

10 ELECTION	ELECTION DATE	ELECTION TYPE
	Month Day Year 11/06/2012	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> 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. ...

<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 \$ 390.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 9,462.00

EXPENDITURE TOTALS

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

4. TOTAL POLITICAL EXPENDITURES \$ 7,277.46

CONTRIBUTION BALANCE

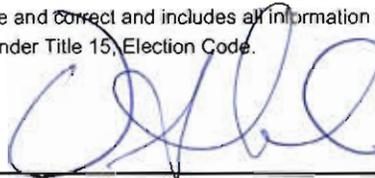
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 2,184.54

OUTSTANDING LOAN TOTALS

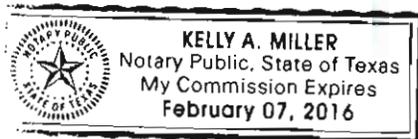
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 2,000.00

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 29 day of October, 2012, to certify which, witness my hand and seal of office.

Kelly A. Miller
Signature of officer administering oath

Kelly A. Miller
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: 1/12 Report: 4/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/20/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Advil Air Conditioning 6 Contributor address; City; State; Zip Code P.O.Box 530669 Harlingen, TX 78553	7 Amount of contribution (\$) \$75.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allen, Julie Uhlhorn Contributor address; City; State; Zip Code 2601 S 77 Sunshine Strip Harlingen, TX 78550	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alex, 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)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bhakta, Hetal Contributor address; City; State; Zip Code 175 W Expressway 83 San Benito, TX 78586	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bhakta, Sukanyaben Contributor address; City; State; Zip Code 2004 Central Blvd Brownsville, TX 78520	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/12 Report: 5/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bhakta, Vinodbhai 6 Contributor address; City; State; Zip Code 205 N Expressway 77 Harlingen, TX 78550	7 Amount of contribution (\$) \$101.00	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 09/07/2012	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 78551	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 09/07/2012	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 78551	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 09/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burke, Bryan Contributor address; City; State; Zip Code 1610 Revere Ln 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 09/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Richard Contributor address; City; State; Zip Code 505 Lake Dr 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: 3/12 Report: 6/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/27/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Mary	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1910 Russell Ln San Benito, TX 78586		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cocke, JR	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O.Box 531805 Harlingen, TX 78553		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooley, Edward	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 146 El Cielo Cr Harlingen, TX 78552		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Day, David Q	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 222 E Van Buren Ste 703 Harlingen, TX 78550		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) De La Garza, Connie	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 503 E Harrison Harlingen, TX 78550		(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: 4/12 Report: 7/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/12/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Robert 6 Contributor address; City; State; Zip Code 4501 Mountain Creek Pkwy Dallas, TX 75236	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)	
Date 09/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliff, Larry Contributor address; City; State; Zip Code 1307 W Hamission Ave 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 09/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliff, William Contributor address; City; State; Zip Code 159 S Nueces Park Ln 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)	
Date 08/07/2012	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	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 08/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Epstien, Brad Contributor address; City; State; Zip Code 1202 Beckham Rd #C Harlingen, TX 78552	Amount of contribution (\$) \$25.00	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: 5/12 Report: 8/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/20/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Epstien, Mel 6 Contributor address; City; State; Zip Code 1013 S 123 Cr Omaha, NE 68154	7 Amount of contribution (\$) \$40.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9		10 Employer (See Instructions)	
Date 08/29/2012	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 (\$) \$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"/>	
9		10 Employer (See Instructions)	
Date 08/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Forrest, Thomas & Emma Contributor address; City; State; Zip Code 2219 Lisa Ann Ave Harlingen, TX 78550	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9		10 Employer (See Instructions)	
Date 09/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garcia, Ramona Contributor address; City; State; Zip Code 2917 Lazy Lake Dr 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"/>	
9		10 Employer (See Instructions)	
Date 09/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garco Enterprises Inc Contributor address; City; State; Zip Code 2917 Lazy Lake Dr 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"/>	
9		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: 6/12 Report: 9/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gorges, Matt	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 1275 Stuart Place Rd Harlingen, TX 78552		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Mary	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 605 Paredes Line Rd Brownsville, TX 78521		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/09/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hess, James R	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 140 S Nueces Park Ln Harlingen, TX 78552		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 08/29/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kornegay, Pat	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 28125 Norma Linda Rd San Benito, TX 78586		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lamon, Michael	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 5910 Country Lane Harlingen, TX 78552		
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: 7/12 Report: 10/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/07/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Malone, Kathy 6 Contributor address; City; State; Zip Code 16433 Garrett Rd Harlingen, TX 78552	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphy, Michael Contributor address; City; State; Zip Code 1102 Ferguson Dr Harlingen, TX 78550	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nikrish LLC Contributor address; City; State; Zip Code 406 N Expressway 77 Harlingen, TX 78550	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, John Contributor address; City; State; Zip Code 222 E Austin Ave Harlingen, TX 78550	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Quisenberry, Judy Contributor address; City; State; Zip Code 22220 Stuart Place Rd Harlingen, TX 78552	Amount of contribution (\$) \$100.00	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 INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/12 Report: 11/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Kelly 6 Contributor address; City; State; Zip Code 2801 Pine Valley Dr Harlingen, TX 78550	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 08/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Jaime 6 Contributor address; City; State; Zip Code 27403 Daniella Ct Harlingen, TX 78552	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 08/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rowe, James 6 Contributor address; City; State; Zip Code 2220 Haine Dr. Ste 49 Harlingen, TX 78550	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 09/07/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rozell, Andrew 6 Contributor address; City; State; Zip Code 323 E Jackson St Harlingen, TX 78550	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 09/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan, Sanjuanana Yazmin 6 Contributor address; City; State; Zip Code 216 Zapata Ave Ranch Viejo, TX 78575	7 Amount of contribution (\$) \$50.00	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: 9/12 Report: 12/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan, Timothy J 6 Contributor address; City; State; Zip Code 216 Zapata Ave Ranch Viejo, TX 78575	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scalef, Michael Contributor address; City; State; Zip Code P.O.Box 1064 San Benito, TX 78586	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepard, Robert Contributor address; City; State; Zip Code 5348 Papaya Cr Harlingen, TX 78552	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shield, Gary Contributor address; City; State; Zip Code 5634 Sam Snead Dr Harlingen, TX 78552	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Silva, Esequiel Contributor address; City; State; Zip Code 5669 Wild Bird Ln Brownsville, TX 78526	Amount of contribution (\$) \$100.00	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 INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 10/12 Report: 13/22	
2 FILER NAME Leal, Victor (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00000001		
4 Date 09/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simmons, Leonard P		7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 19573 Simmons Rd San Benito, TX 78586		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 09/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, David		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1626 Sam Houston Harlingen, TX 78550		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trolinger, Jim		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 22717 Briggs Colman Harlingen, TX 78550		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 08/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Uhlhorn, Martha Stockley		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2601 S Hwy 77 Harlingen, TX 78550		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 08/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Uhlhorn, Tudor		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2601 S 77 Sunshine Strip Harlingen, TX 78550		(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: 11/12 Report: 14/22	
2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valley Hotelier Inc 6 Contributor address; City; State; Zip Code 205 N. Expressway 77 Harlingen, TX 78551	7 Amount of contribution (\$) \$101.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vaughan, Charles Contributor address; City; State; Zip Code 5717 Brazilwood Ct Harlingen, TX 78552	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Villarreal, Elva Contributor address; City; State; Zip Code 2010 E Vinson Ave Harlingen, TX 78550	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wittehbach, Diane Contributor address; City; State; Zip Code 18116 Garrett Rd Harlingen, TX 78552	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/17/2012	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"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Raimbursement
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: 1/2 Report: 17/22	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 09/17/2012	5 Payee name Advil AC
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6 Amount (\$) \$75.00	7 Payee address City; State; Zip Code P.O.Box 530669 Harlingen, TX 78553
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Misc	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Return of Contribution
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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 09/13/2012	Payee name Garco Enterprises Inc
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Amount (\$) \$200.00	Payee address City; State; Zip Code 2917 Lazy Lake Dr Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Misc	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Return of Contribution
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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 09/07/2012	Payee name Meade Marketing
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Amount (\$) \$4,628.56	Payee address City; State; Zip Code 211 W Jefferson Ste 7 Harlingen, TX 78550
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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"/> Signs/Print Media
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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 09/25/2012	Payee name Meade Marketing
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Amount (\$) \$1,824.00	Payee address City; State; Zip Code 211 W Jefferson Ste 7 Harlingen, TX 78550
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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"/> Signs/Print Media
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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

SCHEDULE F

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: 18/22	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 09/13/2012	5 Payee name NIKRISH LLC
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6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 406 N Expressway 77 Harlingen, TX 78550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Misc	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Return of Contribution
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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 09/13/2012	Payee name Valley Hotelier Inc
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Amount (\$) \$101.00	Payee address City; State; Zip Code 205 N Expressway 77 Harlingen, TX 78551
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Misc	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Return of Contribution
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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 | 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: 1/4 Report: 19/22	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 09/14/2012	5 Payee name CVS	
6 Amount (\$) \$4.39	7 Payee address City; State; Zip Code 118 E Harrison Harlingen, TX 78550	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Photo	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photo Processing
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Date 09/22/2012	Payee name Johnny's True Value	
Amount (\$) \$11.90	Payee address City; State; Zip Code 914 W Tyler Harlingen, TX 78550	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		

8 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"/> Nylon Ties
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Date 09/08/2012	Payee name McCoys	
Amount (\$) \$19.90	Payee address City; State; Zip Code 3601 W Expressway 83 Harlingen, TX 78552	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		

8 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"/> Sign Supplies
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Date 09/11/2012	Payee name McCoys	
Amount (\$) \$6.47	Payee address City; State; Zip Code 3601 W Expressway 83 Harlingen, TX 78552	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		

8 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"/> Sign Supplies
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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: 2/4 Report: 20/22	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 09/22/2012	5 Payee name McCoys
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6 Amount (\$) \$25.97	7 Payee address City; State; Zip Code 3601 W Expressway 83 Harlingen, TX 78552
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Reimbursement from political contributions intended

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) <input type="checkbox"/> Sign Supplies
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Date 09/25/2012	Payee name McCoys
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Amount (\$) \$23.00	Payee address City; State; Zip Code 3601 W Expressway 83 Harlingen, TX 78552
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Reimbursement from political contributions intended

8 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"/> Sign Supplies
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Date 09/10/2012	Payee name Office Depot
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Amount (\$) \$2.37	Payee address City; State; Zip Code 605 S Expressway 83 Harlingen, TX 78552
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Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Office Supplies	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Post-its
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Date 09/18/2012	Payee name Office Depot
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Amount (\$) \$8.13	Payee address City; State; Zip Code 605 S Expressway 83 Harlingen, TX 78552
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Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Office Supplies	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies
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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.

1 PAGE # Schedule: 3/4 Report: 21/22		2 FILER NAME Leal, Victor (Mr.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 09/22/2012		5 Payee name Stripes			
6 Amount (\$) \$15.14 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 1313 Haverford Harlingen, TX 78552			
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 Workers	
Date 08/27/2012		Payee name USPO			
Amount (\$) \$22.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 709 W 77 Sunshine Strip Harlingen, TX 78550			
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	
Date 09/24/2012		Payee name USPO			
Amount (\$) \$18.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 709 W 77 Sunshine Strip Harlingen, TX 78550			
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	
Date 09/16/2012		Payee name Vista Print			
Amount (\$) \$24.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code www.vistaprint.com			
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"/> Push Cards	

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.

1 PAGE # Schedule: 4/4 Report: 22/22	2 FILER NAME Leal, Victor (Mr.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 08/26/2012	5 Payee name Walmart
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6 Amount (\$) \$5.38 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 1801 W Lincoln Harlingen, TX 78552
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Office Supplies	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Thank You Cards
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Date 09/05/2012	Payee name Walmart
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Amount (\$) \$10.76 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1801 W Lincoln Harlingen, TX 78552
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Office supplies	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Thank You Cards
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