

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <div style="font-size: 1.5em; margin-left: 10px;">10</div>	
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR MR</div> <div>FIRST MI</div> </div> <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST</div> <div>SUFFIX</div> </div> <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <div>PETE</div> <div>GARCIA</div> <div>JR.</div> </div> </div> </div>		<div style="border: 1px solid black; padding: 5px; text-align: center;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Received <div style="font-size: 1.2em; color: blue; margin: 5px 0;">RECEIVED</div> <div style="color: red; margin: 5px 0;">DEC 07 2023</div> <div style="color: blue; margin: 5px 0;">BY: NC 3:15pm</div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Hand-delivered or Date Postmarked </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <div>Receipt #</div> <div>Amount \$</div> </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Processed </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Imaged </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX;</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <div style="margin-top: 10px;"> 1602 W. CHERRY Blossom Circle Weslaco Texas 78596 </div>			
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <div style="margin-top: 10px;"> (956) 463-5455 </div>			
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR MR</div> <div>FIRST MI</div> </div> <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST</div> <div>SUFFIX</div> </div> <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <div>ARNOLD</div> <div>CAVAZOS</div> <div>JR.</div> </div> </div> </div>			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE);</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <div style="margin-top: 10px;"> 101 N. FORD Weslaco Texas </div>			
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <div style="margin-top: 10px;"> (956) 463-1090 </div>			
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>			
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year 11 / 01 / 23 </div> <div>THROUGH</div> <div> Month Day Year 12 / 05 / 23 </div> </div>			
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month Day Year 11 / 07 / 23 </div> <div> ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </div> </div>			
12 OFFICE	<div style="display: flex; justify-content: space-between;"> <div>OFFICE HELD (if any)</div> <div>13 OFFICE SOUGHT (if known)</div> </div> <div style="margin-top: 10px;"> Weslaco City Commissioner Dist. 2 </div>			
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	<div style="border: 1px solid black; padding: 5px;"> <p style="font-size: 0.8em; margin: 0;">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.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px; vertical-align: top;"> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td style="padding: 5px;"> COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS </td> </tr> </table> </div>		COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS			

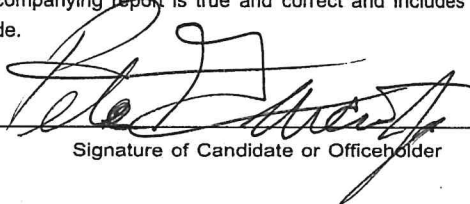
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

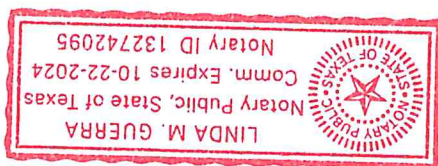
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 1,350.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,350.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 366.23
	4. TOTAL POLITICAL EXPENDITURES	\$ 366.23
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,561.62
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 500.00

18 SIGNATURE 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

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Pete Garcia JR. this the 17th day of December.

2023, to certify which, witness my hand and seal of office.

Linda M. Guerra

Linda M. Guerra

Notary

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____.

(street)

(city)

(state)

(zip code)

(country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month)

(year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,350. ⁰⁰
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ - 0 -
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ - 0 -
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 500. ⁰⁰
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 366. ³³
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ - 0 -
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ - 0 -
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 283. ⁵¹
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 82. ⁸²
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ - 0 -
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ - 0 -
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>PETE GARCIA, JR.</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>11/6/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>FRANK GARZA-ATTNY AT LAW</i> 6 Contributor address; City; State; Zip Code <i>WESLACO TX. 78596</i>	7 Amount of contribution (\$) <i>\$ 300.00</i>
8 Principal occupation / Job title (See Instructions) <i>LAW Office</i>		9 Employer (See Instructions) <i>SELF-EMPLOYED</i>
Date <i>11/8/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>LAW Office of ELOY SEPULVEDA</i> Contributor address; City; State; Zip Code <i>716 S. TX Blvd Weslaco TX. 78596</i>	Amount of contribution (\$) <i>\$ 300.00</i>
Principal occupation / Job title (See Instructions) <i>ATTORNEY</i>		Employer (See Instructions) <i>ELOY SEPULVEDA</i>
Date <i>11/13/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>REPUBLIC SERVICES</i> Contributor address; City; State; Zip Code <i>18500 N. Allied Way PHOENIX AZ 85054</i>	Amount of contribution (\$) <i>\$ 750.00</i>
Principal occupation / Job title (See Instructions) <i>TRASH Pickup & RECYCLING</i>		Employer (See Instructions) <i>REPUBLIC SERVICES, INC.</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

LOANS**SCHEDULE E**

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:	
2 FILER NAME <i>PETE GARCIA JR.</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS		\$ <i>500.00</i>	
5 Date of loan <i>3/7/23</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>PETE GARCIA JR.</i>	9 Loan Amount (\$) <i>500.00</i>	
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code <i>1602 W. CHERRY Weslaco TX. 78596</i> <i>BLOSSOM CIRCLE</i>	10 Interest rate	
		11 Maturity date	
12 Principal occupation / Job title (See Instructions) <i>RETIRED</i>		13 Employer (See Instructions)	
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)	
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	

Date of loan	Name of lender <input type="checkbox"/> 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 <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code		
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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME PETE GARCIA, JR.		3 Filer ID (Ethics Commission Filers)	
4 Date 11/8/23		5 Payee name VERA'S King of MEAT			
6 Amount (\$) \$184.23		7 Payee address; City; State; Zip Code 2941 TEXAS BLVD N. WESLACO TX 78599			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EVENT EXPENSE		(b) Description LUNCH DURING POLITICAL CAMPAIGN		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held PETE GARCIA, JR. Weslaco City Commissioner DIST. 2					
Date 11/8/23		Payee name VERA'S King of MEAT			
Amount (\$) \$80.53		Payee address; City; State; Zip Code 2941 N. TEXAS BLVD Weslaco TX. 78599			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EVENT EXPENSE		Description LUNCH DURING POLITICAL CAMPAIGN		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held PETE GARCIA, JR. Weslaco City Commissioner DIST. 2					
Date 11/13/23		Payee name EL DORADO REST.			
Amount (\$) \$18.75		Payee address; City; State; Zip Code 318 W. PIKE BLVD Weslaco TX. 78596			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EVENT EXPENSE		Description BREAKFAST DURING POLITICAL CAMPAIGN		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held PETE GARCIA, JR. Weslaco City Commissioner DIST. 2					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME PETE GARCIA JR.	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 283.51
5 Date 11/8/23	6 Payee name VERA'S King of Meat	
7 Amount (\$) \$184.23	8 Payee address; 2941 TX. BLVD N. Westlaco	City; State; Zip Code TX. 78599
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EVENT EXPENSE	(b) Description Lunch during political Campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name PETE GARCIA JR. Office sought Westlaco City Commissioner Dist. 2 Office held	
Date 11/8/23	Payee name Vera's King of Meat	
Amount (\$) \$80.53	Payee address; 2941 N. TX BLVD Westlaco	City; State; Zip Code TX. 78599
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description Lunch during political Campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name PETE GARCIA JR. Office sought Westlaco City Commissioner Dist. 2 Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 283.51
5 Date 11/13/23	6 Payee name EL DORADO REST.	
7 Amount (\$)	8 Payee address; City; State; Zip Code 318 W. PIKE BLVD Weslaco TX. 78596	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EVENT EXPENSE	(b) Description BREAKFAST DURING political campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held PETE GARCIA JR. Weslaco City Commissioner Dist. 2	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME PETE GARCIA, JR.	3 Filer ID (Ethics Commission Filers)
4 Date 9/14/23	5 Payee name Weslaco Daily Grind	
6 Amount (\$) \$82.82 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 409 S. Missouri Weslaco TX. 78596	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EVENT EXPENSE	(b) Description coffee + sweets for political morning meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME

PETE GARCIA, JR.

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Pete Garcia, Jr.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:



I do not have unexpended contributions or unexpended interest or income earned from political contributions.



I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:



I do not retain assets purchased with political contributions or interest or other income from political contributions.



I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••



I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder