

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: 2em; text-align: center;">50</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr. FIRST: Vidal MI: NICKNAME: LAST: Rodriguez SUFFIX:	OFFICE USE ONLY Date Received: 2018 JAN 12 PM 2:30 CITY SECRETARY'S OFFICE RECEIVED Date Hand-delivered or Date Postmarked:	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE 3001 Pecos Plaza Laredo TX. 78046		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: (956) PHONE NUMBER: 267-0191 EXTENSION:		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mrs. FIRST: Daisy MI: A. NICKNAME: LAST: Campos SUFFIX:		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE 3001 Pecos Plaza Laredo, TX. 78046		
8 CAMPAIGN TREASURER PHONE	AREA CODE: (956) PHONE NUMBER: 284-9601 EXTENSION:		
9 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)		
10 PERIOD COVERED	Month Day Year Month Day Year 01 / 01 / 2017 THROUGH 12 / 31 / 2017		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) City of Laredo City Councilman	13 OFFICE SOUGHT (if known) City Councilman District #2	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT


FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME <p style="font-size: large; font-family: cursive;">Team Vidal Rodriguez</p>
		COMMITTEE ADDRESS <p style="font-size: large; font-family: cursive;">3001 Pecos Plaza</p>
		COMMITTEE CAMPAIGN TREASURER NAME <p style="font-size: large; font-family: cursive;">Daisy A. Campos</p>
		COMMITTEE CAMPAIGN TREASURER ADDRESS <p style="font-size: large; font-family: cursive;">3001 Pecos Plaza</p>

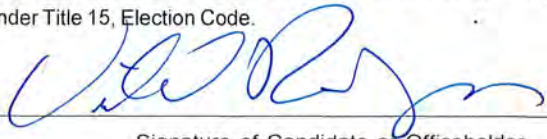
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0. ⁰⁰
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,650. ⁰⁰
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0. ⁰⁰
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,228. ³⁰
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 535. ⁸³
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0. ⁰⁰

18 AFFIDAVIT

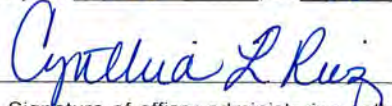


AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Vidal Rodriguez, this the January day of 12th, 20 18, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Cynthia L. Ruiz
 Printed name of officer administering oath

Notary Public
 Title of officer administering oath

SUBTOTALS - COH

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 checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,650 ⁰⁰
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,228. ³⁰
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule A1:

8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

08/14/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Laredo Amanecer Homes

6 Contributor address; City; State; Zip Code

P.O. Box 450050 Laredo, TX. 78045

7 Amount of contribution (\$)

500⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/14/17

Full name of contributor out-of-state PAC (ID#: _____)

Laredo Police Officers' Association

Contributor address; City; State; Zip Code

P.O. Box 2776 Laredo, TX. 78044

Amount of contribution (\$)

250⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/18/17

Full name of contributor out-of-state PAC (ID#: _____)

Jose Ignacio De Ugarte

Contributor address; City; State; Zip Code

5959 Maple Av. Apt 2202 Dallas, TX. 75235

Amount of contribution (\$)

250⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/07/17

Full name of contributor out-of-state PAC (ID#: _____)

Hachar Investment

Contributor address; City; State; Zip Code

3302 Cuatro Vientos Dr. Ste. 23B
Laredo, TX. 78046

Amount of contribution (\$)

2,500⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

10/27/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Laredo Fire' Fighters Association Local 872

6 Contributor address; City; State; Zip Code

5219 Tesoro Plaza Laredo, TX. 78041

7 Amount of contribution (\$)

400⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

L+F Distributors

Contributor address; City; State; Zip Code

410 Crossroads Ave Laredo, TX. 78045

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

Oscar Serna

Contributor address; City; State; Zip Code

162 Lake Carnegie Laredo, TX. 78041

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

HHR Tire Center

Contributor address; City; State; Zip Code

3210 Jaime Zapata Hwy Bldg C Laredo, TX 78043

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

10/27/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Cesar J. Cabello

7 Amount of contribution (\$)

400⁰⁰

6 Contributor address; City; State; Zip Code

1205 N. Jarvis Laredo, TX. 78040

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

Flores, Flores and Canales

Amount of contribution (\$)

200⁰⁰

Contributor address; City; State; Zip Code

5517 McPherson rd. STE 14 Laredo, TX. 78041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

East Laredo Home Place

Amount of contribution (\$)

400⁰⁰

Contributor address; City; State; Zip Code

P.O. BOX. 450050 Laredo, TX. 78045

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

J.R. Medina Operating Investments

Amount of contribution (\$)

200⁰⁰

Contributor address; City; State; Zip Code

1205 E. Hillside STE. A. Laredo, TX. 78041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

10/27/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Sola Development Partners

6 Contributor address; City; State; Zip Code

P.O. Box 1670 Laredo, TX. 78044

7 Amount of contribution (\$)

200⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

Rosaura Wawi Tuerina Campaign Acct.

Contributor address; City; State; Zip Code

11001 Lane St. Laredo, TX. 78043

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

Santa Fe Webb

Contributor address; City; State; Zip Code

P.O. Box 505 Benavides, TX. 78341

Amount of contribution (\$)

500⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

Laredo, Police Officers' Association

Contributor address; City; State; Zip Code

6426 Polaris Dr. Laredo, TX. 78041

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

10/27/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Viviana Frank / Frank M. Rotnorski

6 Contributor address; City; State; Zip Code

901 Victoria St. STE. A, Laredo, TX. 78040

7 Amount of contribution (\$)

500⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

ULLOA'S Plumbing

Contributor address; City; State; Zip Code

4015 Manzanillo, Laredo, TX. 78040

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

F+A Express

Contributor address; City; State; Zip Code

14415 Mines Rd. Laredo, TX. 78045

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

Zertuche Construction + Management Service

Contributor address; City; State; Zip Code

107 Calle Del Norte STE. #4, Laredo, TX. 78041

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

10/27/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Palafox Hospitality

6 Contributor address; City; State; Zip Code

1000 Zaragoza st. Laredo, TX. 78040

7 Amount of contribution (\$)

400⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/27/17

Full name of contributor out-of-state PAC (ID#: _____)

John R. Solis

Contributor address; City; State; Zip Code

2620 San Bernardo. Laredo, TX. 78040

Amount of contribution (\$)

400⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/17

Full name of contributor out-of-state PAC (ID#: _____)

Juan Homero Sanchez / Claudia Gtz. Sanchez

Contributor address; City; State; Zip Code

308 Latour Laredo, TX. 78041

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14/17

Full name of contributor out-of-state PAC (ID#: _____)

Jose Ignacio De Ugarte

Contributor address; City; State; Zip Code

5959 Maple Ave. Apt 2202. Dallas, TX. 75235

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

11/14/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Edward Garza / Annie Garza

7 Amount of contribution (\$)

200⁰⁰

6 Contributor address; City; State; Zip Code

1522 Demaret Ct. Laredo, TX. 78045

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/14/17

Full name of contributor out-of-state PAC (ID#: _____)

Southern Distributing

Amount of contribution (\$)

200⁰⁰

Contributor address; City; State; Zip Code

P.O. Box 333 Laredo, TX. 78042

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14/17

Full name of contributor out-of-state PAC (ID#: _____)

Laredo-Fire PAC.

Amount of contribution (\$)

1,000⁰⁰

Contributor address; City; State; Zip Code

5219 Tesoro Plz. Laredo, TX. 78041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/20/17

Full name of contributor out-of-state PAC (ID#: _____)

WFT Financial

Amount of contribution (\$)

250⁰⁰

Contributor address; City; State; Zip Code

P.O. Box 450050 Laredo, TX. 78045

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

12/20/17

5 Full name of contributor out-of-state PAC (ID#: _____)

Juan H. Sanchez / Claudia G. Sanchez

6 Contributor address; City; State; Zip Code

308 LATOUR Laredo, TX. 78041

7 Amount of contribution (\$)

300⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/20/17

Full name of contributor out-of-state PAC (ID#: _____)

Eduardo X. Quiroga

Contributor address; City; State; Zip Code

2407 BOVOS CT. Laredo, TX. 78045

Amount of contribution (\$)

300⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/20/17

Full name of contributor out-of-state PAC (ID#: _____)

Cesar J. Cabello

Contributor address; City; State; Zip Code

1205 N. Jarvis Laredo, TX. 78040

Amount of contribution (\$)

300⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1: 39		2 FILER NAME Vidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 07/31/17		5 Payee name Danny's Restaurant			
6 Amount (\$) 23.46		7 Payee address; City; State; Zip Code 5120 TX-359. Laredo, Tx. 78043			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought

Date 07/31/17		Payee name Whataburger			
Amount (\$) 35.21		Payee address; City; State; Zip Code 4416 TX-359. Laredo, TX. 78043			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage		Description <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		Office sought

Date 08/14/17		Payee name Vidal Rodriguez Campaign			
Amount (\$) 400⁰⁰		Payee address; City; State; Zip Code 3001 Pecos Plaza. Laredo, TX. 78046			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense / SKoolbo End of Summer		Description <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		Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1: 39		2 FILER NAME Vidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 08/21/17		5 Payee name Chick - FI-A			
6 Amount (\$) 31.00⁰⁰		7 Payee address; City; State; Zip Code 1914 Bobo Bullock Laredo, TX. 78043			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food / Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Candidate / Officeholder name		Office sought		Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/25/17		Payee name Palenque Grill			
Amount (\$) 40⁰⁰		Payee address; City; State; Zip Code 7220 Bobo Bullock Ln #2 Laredo, TX. 78041			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Candidate / Officeholder name		Office sought		Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/28/17		Payee name Santo Remedio Restaurant			
Amount (\$) 151.55		Payee address; City; State; Zip Code 6111 Shiloh Dr. #7 Laredo, TX. 78045			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Candidate / Officeholder name		Office sought		Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 08/30/17	5 Payee name McDonalds	
6 Amount (\$) 33.23	7 Payee address; City; State; Zip Code 2502 US. 83. Laredo, TX. 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food / Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/11/17	Payee name Sams Club
Amount (\$) 96.88	Payee address; City; State; Zip Code 4810 San Bernardo, Laredo, TX. 78041

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage "Donation" "tailgates"	Description <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	Office sought	Office held
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Date 09/11/17	Payee name McDonalds
Amount (\$) 18.56	Payee address; City; State; Zip Code 2502 U.S. 83. Laredo, TX 78046

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 09/12/17	5 Payee name Fandangos
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6 Amount (\$) 61.65	7 Payee address; City; State; Zip Code 5300 San Dario Av. Laredo, TX. 78041
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift Card Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/13/17	Payee name Alamo Drafthouse
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Amount (\$) 83.35	Payee address; City; State; Zip Code 11210 EastPoint Dr. Laredo, TX. 78041
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift Card Donations	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/13/17	Payee name Jack In The Box
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Amount (\$) 29.55	Payee address; City; State; Zip Code 4502 S. Zapata Hwy. Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Uldal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 09/18/17	5 Payee name Peter Piper Pizza
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6 Amount (\$) 86.32	7 Payee address; City; State; Zip Code 4411 US-83, Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food / Beverage "Pizzas for Santa Margarita Church"	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 09/18/17	Payee name Stripes
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Amount (\$) 42.67	Payee address; City; State; Zip Code 3710 US. 83. Laredo, TX 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 09/18/17	Payee name Logans
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Amount (\$) 126.82	Payee address; City; State; Zip Code 5300 San Dario. Laredo, TX. 78041
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 09/25/17	5 Payee name Dannys' Restaurant
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6 Amount (\$) 69.99	7 Payee address; City; State; Zip Code 4450 S. Zapata Hwy. Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food / Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/25/17	Payee name Wingstop
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Amount (\$) 28.75	Payee address; City; State; Zip Code 4415 U.S. 83 Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/25/17	Payee name The International of Laredo
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Amount (\$) 234.34	Payee address; City; State; Zip Code 7128 Rosson Rd. Laredo, TX. 78041
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 09/25/17	5 Payee name STRIPES
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6 Amount (\$) 9.78	7 Payee address; City; State; Zip Code 3920 Aquanieve Dr. Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 09/25/17	Payee name McDonalds
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Amount (\$) 22.88	Payee address; City; State; Zip Code 2502 Hwy-83 Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 09/25/17	Payee name Dollar General
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Amount (\$) 32.33	Payee address; City; State; Zip Code 5202 TX-359 Laredo, TX. 78043
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense "tailgate CHS"	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 09/27/17	5 Payee name Loncheria El Popo	
6 Amount (\$) 20 ⁰⁰	7 Payee address; City; State; Zip Code 4205 Jaime Zapata Memorial Laredo TX 78043	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/20/17	Payee name EXXONMOBIL
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Amount (\$) 37.74	Payee address; City; State; Zip Code 4420 S. Zapata Hwy Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/20/17	Payee name STRIPES
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Amount (\$) 56.28	Payee address; City; State; Zip Code 3710 U-S. 83. Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Widal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 10/23/17	5 Payee name Charlie's Corona
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6 Amount (\$) 52.53	7 Payee address; City; State; Zip Code 3902 San Bernardo Ave. Laredo, Tx. 78041
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/23/17	Payee name Wingstop
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Amount (\$) 87.23	Payee address; City; State; Zip Code 4415 U.S. 83. Laredo, Tx. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/23/17	Payee name Los Jacales Restaurant
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Amount (\$) 30.03	Payee address; City; State; Zip Code 6020 Guadalupe st. Laredo, Tx. 78040
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal	3 Filer ID (Ethics Commission Filers)
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4 Date 10/23/17	5 Payee name Academy Sports
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6 Amount (\$) 131.83	7 Payee address; City; State; Zip Code 10820 International Blvd. Laredo, TX 78045
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense "Fundraiser door Prizes"	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 10/24/17	Payee name El Taco Tote
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Amount (\$) 98.88	Payee address; City; State; Zip Code 1701 Norton St. Laredo, TX. 78044
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 10/26/17	Payee name Sams Club
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Amount (\$) 146.60	Payee address; City; State; Zip Code 4810 San Bernardo Ave. Laredo, TX 78041
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Donation for Platesale "Plates + Utensils"	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

7 clothing.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 10/27/17	5 Payee name Casa Raul
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6 Amount (\$) 178.59	7 Payee address; City; State; Zip Code 2420 Bobo Bullock Laredo, TX. 78041
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Clothing	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 10/30/17	Payee name Los Jacales Restaurant
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Amount (\$) 21.64	Payee address; City; State; Zip Code 6020 Guadalupe Laredo, TX. 78040
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 10/30/17	Payee name The International of Laredo
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Amount (\$) 202.40	Payee address; City; State; Zip Code 7128 Prosson Rd #1 Laredo, TX. 78041
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 10/30/17	5 Payee name The International of Laredo
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6 Amount (\$) 111.08	7 Payee address; City; State; Zip Code 7128 Rosson. Laredo, TX. 78041
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food / Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/31/17	Payee name STRIPES
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Amount (\$) 35.00	Payee address; City; State; Zip Code 2519 Jacarman Rd. Laredo, TX 78041
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/31/17	Payee name Whataburger
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Amount (\$) 7.51	Payee address; City; State; Zip Code 809 Riverhill dr. Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 11/01/17	5 Payee name Taqitos Ravi
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6 Amount (\$) 50.18	7 Payee address; City; State; Zip Code 1420 Market St. Laredo, TX. 78040
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/03/17	Payee name McDonalds
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Amount (\$) 12.20	Payee address; City; State; Zip Code 2502 U-S-83. Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/03/17	Payee name Hector Holiday Funds
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Amount (\$) 250 ⁰⁰	Payee address; City; State; Zip Code 2502 Okane Laredo, TX. 78043
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Bowling Fundraiser Donation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/06/17	5 Payee name La Paisana	
6 Amount (\$) 34.00	7 Payee address; City; State; Zip Code 1920 Santa Ursula Laredo, Tx. 78040	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food / Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 11/06/17	Payee name Corner Store	
Amount (\$) 10.00	Payee address; City; State; Zip Code 2215 S. Zapata Hwy. Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 11/06/17	Payee name Domino's	
Amount (\$) 36.18	Payee address; City; State; Zip Code 1920 Thurman St. Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage "Pizzas Donation"	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 11/06/17	5 Payee name Stripes
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6 Amount (\$) 37.41	7 Payee address; City; State; Zip Code 3302 Pita Mangana. Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 11/06/17	Payee name Palenque Grill
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Amount (\$) 42.13	Payee address; City; State; Zip Code 7220 Bob Bullock #2. Laredo, TX. 78041
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 11/07/17	Payee name Whataburger
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Amount (\$) 34.90	Payee address; City; State; Zip Code 809 Riverhill Dr. Laredo, TX. 7804
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1: 39		2 FILER NAME Vidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 11/08/17		5 Payee name HERB			
6 Amount (\$) 129.20		7 Payee address; City; State; Zip Code 2314 US-83, Laredo, TX. 78044			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Donation "Thanksgiving Party"		(b) Description <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 11/08/17		Payee name Stripes			
Amount (\$) 4.20		Payee address; City; State; Zip Code 3710 US-83 Laredo, TX. 78046			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		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 11/09/17		Payee name Peter Piper Pizza			
Amount (\$) 92.02		Payee address; City; State; Zip Code 4411 US-83 Laredo, TX. 78046			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Donation Ashlyn Rivas Medical Exp. Fundraiser"		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	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/10/17	5 Payee name May A Mandel Municipal	
6 Amount (\$) 24.50	7 Payee address; City; State; Zip Code 27700 Mines Rd. Laredo, TX. 78045	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 11/10/17	Candidate / Officeholder name HERB	
Amount (\$) 235.59	City; State; Zip Code 2314 S. Zapata Hwy Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense Community feast	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 11/10/17	Candidate / Officeholder name Fernando Guel	
Amount (\$) 125.00	City; State; Zip Code 3002 E. Kearney Laredo, TX. 78043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Bowling fundraiser Donation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/13/17	5 Payee name Stripes	
6 Amount (\$) 26.00	7 Payee address; City; State; Zip Code 3710 US-83 Laredo, TX. 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/13/17	Payee name Wingstop	
Amount (\$) 57.16	Payee address; City; State; Zip Code 4415 US-83. Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/13/17	Payee name HEB	
Amount (\$) 42.06	Payee address; City; State; Zip Code 2314 US-83. Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense "Community Feast"	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/13/16	5 Payee name McDonalds	
6 Amount (\$) 19.77	7 Payee address; City; State; Zip Code 2502 US-83 Laredo, TX. 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/13/17	Payee name Laredo Energy Arena	
Amount (\$) 85.75	Payee address; City; State; Zip Code 6700 Arena Blvd, Laredo, TX. 78041	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/13/17	Payee name Altitude Trampoline	
Amount (\$) 5.00	Payee address; City; State; Zip Code 6019 McPherson Rd, Laredo, TX 78041	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Donation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1: 39		2 FILER NAME Vidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 11/14/17		5 Payee name Danny's Restaurant			
6 Amount (\$) 124.04		7 Payee address; City; State; Zip Code 4450 S. Zapata Hwy Laredo, TX 78040			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description <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 11/15/17		Payee name Starbucks			
Amount (\$) 12.18		Payee address; City; State; Zip Code 1310 A. Delmar Blvd, Laredo, TX. 78041			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		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 11/15/17		Payee name Exxon Mobil			
Amount (\$) 40.00		Payee address; City; State; Zip Code 2501 US-83 Laredo, TX. 78040			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Transportation		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	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/15/17	5 Payee name Jack In the Box	
6 Amount (\$) 21.56	7 Payee address; City; State; Zip Code 4502 US-83 Laredo, TX. 78044	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/16/17	Candidate / Officeholder name Los Jacales Restaurant	Office sought Office held
Amount (\$) 21.29	Payee address; City; State; Zip Code 6020 Guadalupe St. Laredo, TX. 78040	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	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		
Date 11/16/17	Candidate / Officeholder name Denise Gonzalez	Office sought Office held
Amount (\$) 100.00	Payee address; City; State; Zip Code 144 Horizon Loop Laredo, TX. 78043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Thanksgiving Donation "Turkeys"	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		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1: 39		2 FILER NAME Uidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 11/16/17		5 Payee name Judge Campos			
6 Amount (\$) 300.00		7 Payee address; City; State; Zip Code 3106 Bismark Laredo, TX. 78046			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Labor "Thanksgiving Com. Fees"		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 11/17/16		Payee name Whataburger			
Amount (\$) 24.42		Payee address; City; State; Zip Code 809 Riverhill Dr. Laredo, TX. 78046			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food / Beverage		Description <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		Office sought	
Date 11/20/17		Payee name Eduardo's Mexican Restaurant			
Amount (\$) 36.60		Payee address; City; State; Zip Code 4160 US-83 Laredo, TX. 78046			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description <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		Office sought	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/2017	5 Payee name Dominos	
6 Amount (\$) 198.29	7 Payee address; City; State; Zip Code 1920 Thurman St. Laredo	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Cigarra Softball Pizzas Donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 11/2017	Payee name Taco Palenque	
Amount (\$) 22.51	Payee address; City; State; Zip Code 3812 S. Zapata Hwy Laredo, TX. 78044	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage.	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 11/2017	Payee name Burger King	
Amount (\$) 26.84	Payee address; City; State; Zip Code 4407 US-83 Laredo, TX. 78044	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1: 39		2 FILER NAME Uidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 11/20/17		5 Payee name Cynthia Rios			
6 Amount (\$) 300.00		7 Payee address; City; State; Zip Code 2002 Mallorca Laredo, Tx. 78043			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Plate Sale Donation		(b) Description <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 11/20/17		Payee name Celestina Campos			
Amount (\$) 500.00		Payee address; City; State; Zip Code 3001 Pecos Plaza Laredo, Tx. 78046			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Thanksgiving Labor		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 11/20/17		Payee name Valerie Campos			
Amount (\$) 350.00		Payee address; City; State; Zip Code 3003 Pecos Plaza Rear #1 Laredo, Tx. 78046			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Labor		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	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/24/17	5 Payee name Laredo Energy Arena	
6 Amount (\$) 239.38	7 Payee address; City; State; Zip Code 6700 Arena Laredo, TX. 78041	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <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
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Date 11/24/17	Payee name Toys "R" US
Amount (\$) 260.13	Payee address; City; State; Zip Code 5404 San Bernardo Ave. Laredo, TX 78046
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense Christmas Toy Drive Giveaway
	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
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Date 11/24/17	Payee name Juan Melendez
Amount (\$) 100.00	Payee address; City; State; Zip Code 2901 Zacatecas St. Laredo, TX. 78046
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Donation
	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
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Widal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/27/17	5 Payee name El Taco Tote	
6 Amount (\$) 55.99	7 Payee address; City; State; Zip Code 1701 Norton St. Laredo, TX. 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 11/27/17	Payee name STRIPES	
Amount (\$) 43.81	Payee address; City; State; Zip Code 3710 US-83 Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 11/27/17	Payee name Subway	
Amount (\$) 9.00	Payee address; City; State; Zip Code 4415 US-83 Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name _____ Office sought _____ Office held _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 11/27/17	5 Payee name Burger King	
6 Amount (\$) 10.15	7 Payee address; City; State; Zip Code 4407 US-83 Laredo, TX. 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <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 11/27/17	Payee name Pauls BBQ	
Amount (\$) 51.78	Payee address; City; State; Zip Code 1820 S. Zapotita Hwy. Laredo, TX 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	10 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date 11/28/17	Payee name Vzaguirre + Sons	
Amount (\$) 9.89	Payee address; City; State; Zip Code 2901 S. Chacotast. Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <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: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 11/28/17	5 Payee name Taco Palenque
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6 Amount (\$) 15.91	7 Payee address; City; State; Zip Code 3212 S. Zapata Hwy Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 11/29/17	Payee name Chili's
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Amount (\$) 62.83	Payee address; City; State; Zip Code 5702 San Bernardo Av. Laredo, TX 78040
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 11/30/17	Payee name McDonalds
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Amount (\$) 17.18	Payee address; City; State; Zip Code 2502 S. Zapata Hwy Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39		2 FILER NAME Vidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 12/04/17		5 Payee name Yukan			
6 Amount (\$) 11.98		7 Payee address; City; State; Zip Code 3702 US-83 Laredo, TX 78046			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____				
Date 12/04/17		Payee name Pollo Palenque			
Amount (\$) 20.52		Payee address; City; State; Zip Code 4180 S. Zapata Hwy Laredo, TX 78046			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage		Description <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 _____ Office sought _____ Office held _____				
Date 12/04/17		Payee name Jack In The Box			
Amount (\$) 17.26		Payee address; City; State; Zip Code 4502 S. Zapata Hwy Laredo, TX 78046			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage		Description <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 _____ Office sought _____ Office held _____				

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 12/04/17	5 Payee name Los Jacales Rest.
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6 Amount (\$) 49.80	7 Payee address; City; State; Zip Code 620 Guadalupe Laredo, TX 78040
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/05/17	Payee name Carlos R. Ramirez
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Amount (\$) 125.00	Payee address; City; State; Zip Code 2503 Boulanger Laredo, TX 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Labour	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 12/06/17	Payee name Tacos Kissi
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Amount (\$) 73.78	Payee address; City; State; Zip Code 2020 Corpus Christi Laredo, TX 78043
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 12/07/17	5 Payee name STRIPES	
6 Amount (\$) 39.00	7 Payee address; City; State; Zip Code 3710 US-83 Laredo, TX. 78044	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 12/11/17	Payee name TOYS "R" US	
Amount (\$) 36.92	Payee address; City; State; Zip Code 5404 San Bernardo Ave. Laredo, TX. 78040	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) EVENT EXPENSE Christma Toy Drive Giveaway	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 12/11/17	Payee name Long John Silver	
Amount (\$) 17.73	Payee address; City; State; Zip Code 5300 San Dario Av. Laredo, TX. 78041	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name _____ Office sought _____ Office held _____	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 12/11/17	5 Payee name Burger King
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6 Amount (\$) 31.92	7 Payee address; City; State; Zip Code 4407 US-83 Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/11/17	Payee name McDonalds
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Amount (\$) 6.91	Payee address; City; State; Zip Code 2502 US-83 Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 12/11/17	Payee name Vidal Rodriguez Campaign
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Amount (\$) 2,300	Payee address; City; State; Zip Code 3001 Pecos Plaza Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense "Christmas Toy Drive Giveaway"	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <p style="text-align:center">39</p>	2 FILER NAME <p style="text-align:center">Uidal Rodriguez</p>	3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align:center">12/12/17</p>	5 Payee name <p style="text-align:center">Wingstop</p>	
6 Amount (\$) <p style="text-align:center">42.00</p>	7 Payee address; City; State; Zip Code <p style="text-align:center">4415 US-83 Laredo, TX. 78040</p>	
8 <p style="text-align:center">PURPOSE OF EXPENDITURE</p>	(a) Category (See categories listed at the top of this schedule) <p style="text-align:center">Food/Beverage</p>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <p style="text-align:center">12/18/17</p>	Payee name <p style="text-align:center">STRIPES</p>	
Amount (\$) <p style="text-align:center">55.00</p>	Payee address; City; State; Zip Code <p style="text-align:center">3710 US-83 Laredo, Tx. 78040</p>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <p style="text-align:center">Transportation</p>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <p style="text-align:center">12/21/17</p>	Payee name <p style="text-align:center">Auntie Annies Pret</p>	
Amount (\$) <p style="text-align:center">8.82</p>	Payee address; City; State; Zip Code <p style="text-align:center">1600 Water St Laredo, TX. 78040</p>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <p style="text-align:center">Food/Beverage</p>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39		2 FILER NAME Vidal Rodriguez		3 Filer ID (Ethics Commission Filers)	
4 Date 12/22/17		5 Payee name EL TACO TOTE			
6 Amount (\$) 41.52		7 Payee address; City; State; Zip Code 1701 Norton St Laredo, TX. 78046			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____				
Date 12/22/17		Payee name TOY "R" US			
Amount (\$) 129.72		Payee address; City; State; Zip Code 5404 SanBernardo, Laredo, TX. 78040			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	Christmas Toy Giveaway				
10 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____					
Date 12/27/17		Payee name POPEYES			
Amount (\$) 32.11		Payee address; City; State; Zip Code 2307 Laredo, TX. 78046			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage		Description <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 _____ Office sought _____ Office held _____					

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Uidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 12/27/17	5 Payee name Portofino
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6 Amount (\$) 121.00	7 Payee address; City; State; Zip Code 1219 Hidalgo st Laredo, TX. 78041
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift/Award/Memorial Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/27/17	Payee name Jack In The Box
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Amount (\$) 40.99	Payee address; City; State; Zip Code 4502 Zapata Hwy Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 12/27/17	Payee name Los Jacales Rest
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Amount (\$) 33.85	Payee address; City; State; Zip Code 1020 Guadalupe St. Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
4 Date 12/27/17	5 Payee name Wingstop	
6 Amount (\$) 43.68	7 Payee address; City; State; Zip Code 4415 US-83 Laredo, TX. 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <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
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Date 12/27/17	Payee name Brisket + Beer Restaurant
Amount (\$) 36.70	Payee address; City; State; Zip Code 2007 Chinuhua st. Laredo, TX. 78043

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 12/27/17	Payee name Family Dollar
Amount (\$) 26.52	Payee address; City; State; Zip Code 2905 S. Zapata Hwy Laredo, TX. 78046

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 12/27/17	5 Payee name Walmart Supercenter
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6 Amount (\$) 97.85	7 Payee address; City; State; Zip Code 4401 US-83 Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/29/17	Payee name STRIPES
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Amount (\$) 25.76	Payee address; City; State; Zip Code 3710 US-83 Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 11/24/17	Payee name HERB
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Amount (\$) 79.66	Payee address; City; State; Zip Code 2314 US-83 Laredo, TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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