

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Pedro I (Pete) Saenz Jr. 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE
 GENERAL
 SPECIFIC

COMMITTEE NAME
Bis River Media

COMMITTEE ADDRESS
P.O. Box 499
Laredo, Tx 78042

COMMITTEE CAMPAIGN TREASURER NAME
Notice of Direct Campaign expenditure pursuant to Sec 254.161
Texas Election Code

COMMITTEE CAMPAIGN TREASURER ADDRESS
N/A

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1,500.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 17,250.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,863.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 19,702.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 240,993.76

18 AFFIDAVIT

TIFFANY L. FRANKLIN
Notary Public, State of Texas
Comm. Expires 11-13-2019
Notary ID 130439701

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.

Pedro I Saenz Jr.
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Pete Saenz, Jr., this the 15th day of January, 2019, to certify which, witness my hand and seal of office.

Tiffany L. Franklin Tiffany L. Franklin Deputy City Secretary IV
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Pedro J (Pete) Saenz Jr.

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,250. 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 MADE FROM POLITICAL CONTRIBUTIONS	\$ 11,863.49
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<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:

11

2 FILER NAME

Pedro (Pete) I Saenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/3/18

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

Union Pacific Corporation Fund for effective

6 Contributor address; City; State; Zip Code

700 13th St. NW Washington, DC
Suite 300 20005

7 Amount of contribution (\$)

\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/1/18

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

Albert T. Lowry

Contributor address; City; State; Zip Code

2410 Bermuda Dr. Laredo, Texas 78045

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/7/18

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

Jesse J. Martinez

Contributor address; City; State; Zip Code

P.O. Box 1405 Laredo, TX 78042

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/6/18

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

Flores Castaño

Contributor address; City; State; Zip Code

P.O. Box 450047 Laredo, TX 78045

Amount of contribution (\$)

\$250.00

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: **11**

2 FILER NAME

Pedro (Pete) I Saenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

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

Guillermo Benavides Or Sonia Benavides

6 Contributor address; City; State; Zip Code

318 Bordeaux Dr. Laredo, Texas 78041

7 Amount of contribution (\$)

\$200.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

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

John A. or Martha Villareal

Contributor address; City; State; Zip Code

2415 Bermuda Dr. Laredo, Texas 78045

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Erasmo A. Villareal

Contributor address; City; State; Zip Code

117 Illinois Laredo, Texas 78041

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Jesus J. Or Monica Ruiz

Contributor address; City; State; Zip Code

3902 Cornell Laredo, Texas 78045

Amount of contribution (\$)

\$500.00

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;

11

2 FILER NAME

Pedro (Pete) J. Suenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

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

Jose Luis Ceballos or Roberta J. Ceballos

6 Contributor address; City; State; Zip Code
419 Survey Rd. Laredo, TX 78041

7 Amount of contribution (\$)

\$300.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

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

John R. Solis / Alexandria Colessides Solis

Contributor address; City; State; Zip Code
2402 Beermuck Laredo, TX 78045

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Person, Whitworth, Barchers & Morales L.L.P.

Contributor address; City; State; Zip Code
602 E. Calton Rd. Laredo, TX 78042

Amount of contribution (\$)

\$2,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Maria Cristina Alvarez

Contributor address; City; State; Zip Code
3006 Hillcrest Circle Laredo, TX 78045

Amount of contribution (\$)

\$1,000.00

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:

11

2 FILER NAME

Pedro (Pete) I. Suenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

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

Chris M. Haynes

7 Amount of contribution (\$)

\$ 500.00

6 Contributor address; City; State; Zip Code

1217 N. Seymour Ave. Laredo, TX 78040

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

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

Elmo or Consuelo F. Flores Sr.

Amount of contribution (\$)

\$ 100.00

Contributor address; City; State; Zip Code

119 Galveston Rd. Laredo, TX 78043

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Mano J. Gauze / Amadeo V. Gauze

Amount of contribution (\$)

\$ 200.00

Contributor address; City; State; Zip Code

2064 Sunset Dr. Zapata, TX 78076

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11

2 FILER NAME

Pedro (Pete) I Saenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

5 Full name of contributor

Eloy Vega

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

10801 Greenville

City; State; Zip Code

Laredo, TX 78045

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

Full name of contributor

G.C. Keene

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$300.00

Contributor address;

304 Regal Drive

City; State; Zip Code

Laredo, Texas 78041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

Full name of contributor

JBC State Political Action Committee

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$2,000.00

Contributor address;

130 E. Travis

City; State; Zip Code

San Antonio, TX 78205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

Full name of contributor

Dennis E. Nixon

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$1,000.00

Contributor address;

P.O. Box Drawer 1359 Laredo, TX 78042

City; State; Zip Code

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:

11

2 FILER NAME

Pedro J (Pete) Scenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

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

S.F. Vale

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address; City; State; Zip Code

P.O. Box 156 78529 Rio Grande City, TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

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

Fred Dickey

Amount of contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

4502 Thomas Ave. Laredo, Tx 78041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Edgar Pava

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

Laredo, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Parker J. Neel

Amount of contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

313 Lake Louis CT. 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:

11

2 FILER NAME

Pedro (Pete) I. Scaenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

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

Estela Martinez

7 Amount of contribution (\$)

\$500.00

6 Contributor address; City; State; Zip Code

108 Emiliano Laredo, TX 78046

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

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

Winder N. Vasquez

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

7210 McPherson Rd. Ste 202 Laredo, TX 78041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Ramon Diez Barroso Salido

Amount of contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

307 Windsor Rd. Laredo, TX 78041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/6/18

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

Eduardo Salido Jr. / Vanessa S. Salido

Amount of contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

1415 Wings feet Loop 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: 11
2 FILER NAME Pedro (Pete) I. Saenz, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 12/9/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillermo J. Cavazos Jr.	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 9114 McPherson Apt 904 Laredo, Tx 78045		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/4/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viviane Frank	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1503 Hoxen Ct. Laredo, Tx 78045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/4/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D. Silva / V.C. Silva	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 110 E. Mayberry Laredo, Tx 78041		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/4/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalo Rida Medellin	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code Laredo, Tx 78046		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11

2 FILER NAME

Pedro (Pete) I Sarnz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

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

Josue R. Martinez

6 Contributor address;

P.O. Box 450305

City; State; Zip Code

Laredo, Tx 78045

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

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

Charles L. Martinez

Contributor address;

5 Northwood Dr.

City; State; Zip Code

Laredo, Tx 78041

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/5/18

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

Armensol Guerra III / Bertha J.P. Guerra

Contributor address;

312 Windsor Rd.

City; State; Zip Code

Laredo, Tx 78041

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Kevin S. Romo

Contributor address;

7917 McPherson Rd.
Ste 408

City; State; Zip Code

Laredo, Tx 78045

Amount of contribution (\$)

100.00

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:

11

2 FILER NAME

Pedro I (Pete) Saenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/4/18

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

D.L. Cardwell / N.R. Cardwell

6 Contributor address; City; State; Zip Code
115 Delaware St. Laredo, Tx 78041

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/4/18

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

Richard M. Leyendecker / Carolyn S. Leyendecker

Contributor address; City; State; Zip Code
110 Delaware St. Laredo Tx 78041

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/14/18

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

Carlos Ibarra

Contributor address; City; State; Zip Code
311 Ridge Road Laredo, Tx 78041

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/4/18

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

Jorge Dominguez

Contributor address; City; State; Zip Code
151 North Ave. Laredo, Tx 78045

Amount of contribution (\$)

\$100.00

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:

11

2 FILER NAME

Redro (Ret) I Saenz Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/10/18

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

G. Leyendecker

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address; City; State; Zip Code
 P.O. Box 1827 Laredo, Tx 78044

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/6/18

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

Alonso L. Ramirez

Amount of contribution (\$)

\$200.00

Contributor address; City; State; Zip Code
 P.O. Box 1943 Laredo, Tx 78044

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/12/18

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

Laredo Vapor, LLC

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
 314 E. Saunders Unit 2 Laredo, Tx 78041

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 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: 5	2 FILER NAME Pedro (Petel) I Sencz Jr.	3 Filer ID (Ethics Commission Filers)
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4 Date 12/7/18	5 Payee name Jennifer Cervic
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6 Amount (\$) \$172.00	7 Payee address; City; State; Zip Code 601 E. San Jose Laredo, Tx 78043
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Poll Watching	(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 12/7/18	Payee name Beatriz Merino
------------------------	-------------------------------------

Amount (\$) \$328.00	Payee address; City; State; Zip Code 622 Bougainvillen Laredo, Tx 78043
--------------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Poll Watching	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 12/7/18	Payee name Alberto Alba
------------------------	-----------------------------------

Amount (\$) \$1,264.00	Payee address; City; State; Zip Code Laredo, Tx 78046
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Poll Watching	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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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: 5	2 FILER NAME Pedro (Ret) J Saenz Jr.	3 Filer ID (Ethics Commission Filers)			
4 Date 12/07/18	5 Payee name PMDG				
6 Amount (\$) \$1,440.00	7 Payee address; City; State; Zip Code 901 Victoria St. Laredo, Tx 78040				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Poll Watching	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 12/11/18	Payee name Romelia Gavez Limon				
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2619 San Isidro Purky # 201 Laredo, Tx 78045				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 12/10/18	Payee name PMDG				
Amount (\$) \$750.00	Payee address; City; State; Zip Code 901 Victoria St. Laredo, Texas 78040				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM 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: 5	2 FILER NAME Pedro (Pete) I Suarez Jr.	3 Filer ID (Ethics Commission Filers)			
4 Date 12/10/18	5 Payee name PMDG				
6 Amount (\$) 998.84	7 Payee address; City; State; Zip Code 901 Victoria St. Laredo Texas 78040				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 12/13/18	Payee name Dos Manias Restaurant				
Amount (\$) \$1,540.00	Payee address; City; State; Zip Code 7702 McPherson Laredo, Tx 78041				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 12/14/18	Payee name PMDG				
Amount (\$) \$1,591.99	Payee address; City; State; Zip Code 901 Victoria Suite C Laredo, Tx 78040				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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 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: 5		2 FILER NAME Reddy (Pete) I Saenz Jr.		3 Filer ID (Ethics Commission Filers)	
4 Date 12/17/2018		5 Payee name Alberto Alca			
6 Amount (\$) \$900.00		7 Payee address; City; State; Zip Code Laredo, TX 78046			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Poll Watching		(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	
Date 12/17/18		Payee name PMDG			
Amount (\$) \$1,040.00		Payee address; City; State; Zip Code 901 Victoria Suite C Laredo, TX 78040			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Poll Watching		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	
Date 12/17/18		Payee name Jennifer Cerda			
Amount (\$) \$168.00		Payee address; City; State; Zip Code 601. E. San Jose Laredo, TX 78043			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Poll Watching		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	

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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)
CreditCardPayment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Pedro (Pete) I Saez Jr.	3 Filer ID (Ethics Commission Filers)
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4 Date 12/17/18	5 Payee name Beatriz Medina
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6 Amount (\$) 192.00	7 Payee address; City; State; Zip Code 622 Boughnitten Laredo, TX 78043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Poll Watching	(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 12/18/18	Payee name Romelic Garza Limon
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 2619 San Isidro Pkwy # 701 Laredo, TX 78045
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	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 12/27/18	Payee name Quarter Mike Inc.
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Amount (\$) \$478.66	Payee address; City; State; Zip Code 6420 Polaris Dr. Ste 4 Laredo, TX 78041
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	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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