

# 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: <span style="font-size: 2em; color: blue;">53</span>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS (MR) FIRST MI <span style="font-size: 1.5em; color: blue;">Vidal</span> NICKNAME LAST SUFFIX <span style="font-size: 1.5em; color: blue;">Rodriguez</span>	<b>OFFICE USE ONLY</b> Date Received  REC'D CITY SEC OFF MAR 23 '21 PM 3:42  Date Hand-delivered or Date Postmarked  Receipt #      Amount \$  Date Processed  Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <span style="font-size: 1.5em; color: blue;">3001 Pecos Plaza Laredo, Tx. 78046</span>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) <span style="font-size: 1.5em; color: blue;">307-1908</span>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <span style="font-size: 1.5em; color: blue;">Daisy Alejandra</span> NICKNAME LAST SUFFIX <span style="font-size: 1.5em; color: blue;">Campos</span>	Receipt #      Amount \$  Date Processed  Date Imaged	
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <span style="font-size: 1.5em; color: blue;">3001 Pecos Plaza Laredo, Tx. 78046</span>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) <span style="font-size: 1.5em; color: blue;">284-9601</span>		
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 Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year      THROUGH      Month Day Year <span style="font-size: 1.5em; color: blue;">07 / 16 / 2020</span> <span style="font-size: 1.5em; color: blue;">01 / 29 / 21</span>		
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) <span style="font-size: 1.5em; color: blue;">City Councilman District 2</span>	13 OFFICE SOUGHT (if known) <span style="font-size: 1.5em; color: blue;">City Councilman District 2</span>	

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 2**

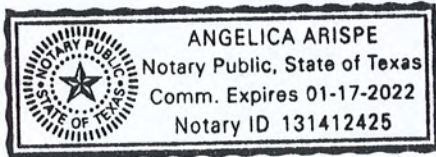
<b>15 C/OH NAME</b> <u>Vidal Rodriguez</u>		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>0<sup>00</sup></u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>9,100<sup>00</sup></u>
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0<sup>00</sup></u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>9,050<sup>92</sup></u>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>33<sup>23</sup></u>
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0<sup>00</sup></u>

**18 SIGNATURE** I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Vidal Rodriguez this the 23 day of March

2021, to certify which, witness my hand and seal of office.

Angelica Arispe Angelica Arispe Deputy City Secretary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)



# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME *Vidal Rodriguez*

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>9,100.00</i>
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	\$ <i>9,050.92</i>
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: <b>5</b>
2 FILER NAME <b>Vidal Rodriguez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>8/15/2020</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Russel Ford</b>	7 Amount of contribution (\$) <b>1,000.00</b>
6 Contributor address; City; State; Zip Code <b>12598 E. State Hwy 21 Bryan, TX. 77808</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>8/19/2020</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>East Laredo Homes</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>P.O. Box 450050 Laredo, TX. 78045</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>8/19/2020</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Laredo Amanecer Homes</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>P.O. Box 450050 Laredo, TX. 78045</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>8/21/2020</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Freight Dispatch Service Agency</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>12014 Sara Road. Laredo, 78045</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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: <span style="font-size: 2em; color: blue;">5</span>
2 FILER NAME <span style="font-size: 1.5em; color: blue;">Vidal Rodriguez</span>		3 Filer ID (Ethics Commission Filers)
4 Date <span style="font-size: 1.5em; color: blue;">08/24/2020</span>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em; color: blue;">Roberto P. Martinez Jr.</span>	7 Amount of contribution (\$) <span style="font-size: 1.5em; color: blue;">200.<sup>00</sup></span>
6 Contributor address; City; State; Zip Code <span style="font-size: 1.5em; color: blue;">P.O. Box 450583 Laredo, TX 78045</span>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <span style="font-size: 1.5em; color: blue;">08/20/2020</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em; color: blue;">B.P. Newman Investment</span>	Amount of contribution (\$) <span style="font-size: 1.5em; color: blue;">500.<sup>00</sup></span>
Contributor address; City; State; Zip Code <span style="font-size: 1.5em; color: blue;">P.O. Box 2058 Laredo, Tx. 78044</span>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <span style="font-size: 1.5em; color: blue;">09/09/2020</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em; color: blue;">Santa FE Webb</span>	Amount of contribution (\$) <span style="font-size: 1.5em; color: blue;">500.<sup>00</sup></span>
Contributor address; City; State; Zip Code <span style="font-size: 1.5em; color: blue;">P.O. Box 505 Benavides, Tx. 78341</span>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <span style="font-size: 1.5em; color: blue;">08/25/2020</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em; color: blue;">Eduardo Quiroga</span>	Amount of contribution (\$) <span style="font-size: 1.5em; color: blue;">400.<sup>00</sup></span>
Contributor address; City; State; Zip Code <span style="font-size: 1.5em; color: blue;">2407 Boros Ct Laredo, TX 78045</span>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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: <u>5</u>
2 FILER NAME <u>Vidal Rodriguez</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>9/21/2020</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Juan Jose Cruz</u> 6 Contributor address; City; State; Zip Code <u>150ce Nelson Ct. Laredo, TX. 78045</u>	7 Amount of contribution (\$) <u>250.00</u>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>9/1/2020</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Juan Homero Sanchez / CLAUDIA G Sanchez</u> Contributor address; City; State; Zip Code <u>308 Latour Laredo, TX. 78041</u>	Amount of contribution (\$) <u>250.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>10/20/2020</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Laredo Police officer Association</u> Contributor address; City; State; Zip Code <u>P.O. Box 2774 Laredo, TX. 78044</u>	Amount of contribution (\$) <u>500.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>11/11/2020</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Laredo Amanecer Homes</u> Contributor address; City; State; Zip Code <u>P.O. Box 450050 Laredo, TX. 78045</u>	Amount of contribution (\$) <u>250.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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: 5

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

11/11/2020

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

East Laredo Home Place

6 Contributor address; City; State; Zip Code

P.O. Box 450050 Laredo, TX. 78045

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/13/2020

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

Viviana Frank / Frank M. Rotnofsky

Contributor address; City; State; Zip Code

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

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/23/2020

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

Laredo Police Officer Association

Contributor address; City; State; Zip Code

P.O. Box 2716 Laredo, TX. 78044

Amount of contribution (\$)

5.00.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/2/2020

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

Donato D. Ramos

Contributor address; City; State; Zip Code

6721 Mcpherson rd. Laredo, TX. 78041

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: **5**

2 FILER NAME

**Vidal Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date

**12/31/2020**

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

**Raul Valdez**

7 Amount of contribution (\$)

**500.00**

6 Contributor address; City; State; Zip Code

**120 Devonshire Laredo, TX. 78041**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**12/16/2020**

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

**Concrete Cutting and Paving**

Amount of contribution (\$)

**1,000.00**

Contributor address; City; State; Zip Code

**P.O. Box 450955 Laredo, TX. 78045**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**8/27/20**

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

**Palafix Hospitality**

Amount of contribution (\$)

**500.00**

Contributor address; City; State; Zip Code

**1000 Zaragoza Laredo, TX. 78040**

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>09/11/2020</b>	5 Payee name <b>Lizbeth Jasso</b>
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6 Amount (\$) <b>500.00</b>	7 Payee address; <b>3201 Santa Barbara Apt 3 Laredo, TX 78041</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Donation</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/14/2020</b>	Payee name <b>Stripes</b>
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Amount (\$) <b>61.30</b>	Payee address; <b>5102 Mepherston Laredo, TX. 78041</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/14/2020</b>	Payee name <b>Palenque Grill</b>
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Amount (\$) <b>163.93</b>	Payee address; <b>7270 Bob Bullock Laredo, TX. 78041</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>09/15/2020</b>	5 Payee name <b>Jack In the Box</b>
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6 Amount (\$) <b>20.64</b>	7 Payee address; City; State; Zip Code <b>2612 Cortez St Laredo, TX. 78043</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/16/2020</b>	Payee name <b>Dairy Queen</b>
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Amount (\$) <b>15.87</b>	Payee address; City; State; Zip Code <b>1701 Guadalupe St - Laredo, TX. 78043</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/21/2020</b>	Payee name <b>Circle K</b>
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Amount (\$) <b>84.17</b>	Payee address; City; State; Zip Code <b>2215 Zapata Hwy Laredo, TX. 78046</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>09/22/2020</b>	5 Payee name <b>Jack In the Box</b>
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6 Amount (\$) <b>41.53</b>	7 Payee address; <b>2412 Cove: Laredo, tx. 78043</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/22/2020</b>	Payee name <b>Stripes</b>
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Amount (\$) <b>30.51</b>	Payee address; <b>701 Guadalupe. Laredo, tx. 78043</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/23/2020</b>	Payee name <b>Texas Roadhouse</b>
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Amount (\$) <b>107.09</b>	Payee address; <b>5722 San Bernardo Laredo, TX. 78040</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>45</b>	<b>2</b> FILER NAME <b>Vidal Rodriguez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>09/24/2020</b>	<b>5</b> Payee name <b>Yumm #4</b>	
<b>6</b> Amount (\$) <b>5.69</b>	<b>7</b> Payee address; City; State; Zip Code <b>9811 Bob Bullock, Laredo, Tx. 78041</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>09/24/2020</b>	<b>Payee name</b> <b>E1 Taco Tote</b>	
<b>Amount (\$)</b> <b>27.98</b>	<b>Payee address; City; State; Zip Code</b> <b>1701 Norton Laredo, TX. 78046</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	<b>Description</b>
	<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
<b>Date</b> <b>09/25/2020</b>	<b>Payee name</b> <b>Mavenos Kwik</b>	
<b>Amount (\$)</b> <b>10.37</b>	<b>Payee address; City; State; Zip Code</b> <b>3161 Jaime Zapata Hwy Laredo, Tx 78045</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	<b>Description</b>
	<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 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.

<b>1</b> Total pages Schedule F1: <b>45</b>	<b>2</b> FILER NAME <b>Vidal Rodriguez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>09/28/2020</b>	<b>5</b> Payee name <b>Lighthouse Steak</b>	
<b>6</b> Amount (\$) <b>80.90</b>	<b>7</b> Payee address; City; State; Zip Code <b>5301 San Davio Laredo, Tx. 78041</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Food / Beverage</b>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>09/29/2020</b>	<b>Payee name</b> <b>Pollo Feliz</b>	
<b>Amount (\$)</b> <b>60.07</b>	<b>Payee address; City; State; Zip Code</b> <b>2458 Zapata Hwy Laredo, Tx. 78043</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>09/29/2020</b>	<b>Payee name</b> <b>Stripes</b>	
<b>Amount (\$)</b> <b>39.01</b>	<b>Payee address; City; State; Zip Code</b> <b>3710 US-Hwy 83 Laredo, Tx. 78046</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	
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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>09/30/2020</b>	5 Payee name <b>Ringo's</b>
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6 Amount (\$) <b>47.31</b>	7 Payee address; <b>5102 TX - 359 Laredo, TX. 78043</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/30/2020</b>	Payee name <b>Target</b>
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Amount (\$) <b>70.13</b>	Payee address; <b>1910 Bobullock lp. Laredo, TX. 7804</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>office overhead</b>	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 <b>10/01/2020</b>	Payee name <b>Chopsticks</b>
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Amount (\$) <b>81.87</b>	Payee address; <b>3511 Jaime Zapata Laredo, TX. 78043</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/02/2020</b>	5 Payee name <b>CE Gilmart</b>
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6 Amount (\$) <b>84.03</b>	7 Payee address; <b>41401 US-83 Laredo, TX. 78046</b>	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/02/2020</b>	Payee name <b>Stripes</b>
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Amount (\$) <b>66.75</b>	Payee address; <b>3710 US-83 Laredo, TX. 78046</b>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/03/2020</b>	Payee name <b>Long Horn Steakhouse</b>
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Amount (\$) <b>16.34</b>	Payee address; <b>3710 - US 83 Laredo, TX. 78046</b>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10/5/2020</b>	5 Payee name <b>Arandas</b>	
6 Amount (\$) <b>54.22</b>	7 Payee address; City; State; Zip Code <b>530 S. Zapata Hwy Laredo, TX. 78046</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>10/6/2020</b>	Payee name <b>Variety Meats</b>		
Amount (\$) <b>38.83</b>	Payee address; City; State; Zip Code <b>3301 Lomas del Sur Laredo, TX. 78046</b>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <b>10/7/2020</b>	Payee name <b>Walmart Supercenter</b>		
Amount (\$) <b>171.83</b>	Payee address; City; State; Zip Code <b>4401 US-Hwy 83 Laredo TX. 78046</b>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>	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 MADE 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **45**      2 FILER NAME: **Vidal Rodriguez**      3 Filer ID (Ethics Commission Filers)

4 Date: **10/07/2020**      5 Payee name: **Target**

6 Amount (\$): **400.11**      7 Payee address; City; State; Zip Code: **1910 Bob Bullock Laredo, TX 78046**

8 PURPOSE OF EXPENDITURE: **Event Expense**  
(a) Category (See Categories listed at the top of this schedule)  
(b) Description  
(c)  Check if travel outside of Texas. Complete Schedule T.       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: **10/09/2020**      Payee name: **Pizza Hut**

Amount (\$): **72.99**      Payee address; City; State; Zip Code: **2119 Pine St Laredo, TX 78046**

PURPOSE OF EXPENDITURE: **Food/Beverage**  
Category (See Categories listed at the top of this schedule)      Description  
 Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH  
Candidate / Officeholder name      Office sought      Office held

Date: **10/11/2020**      Payee name: **Variety Meats**

Amount (\$): **238.25**      Payee address; City; State; Zip Code: **3301 Lomas del Sur Laredo TX 78046**

PURPOSE OF EXPENDITURE: **Food/Beverage**  
Category (See Categories listed at the top of this schedule)      Description  
 Check if travel outside of Texas. Complete Schedule T.       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 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/12/2020</b>	5 Payee name <b>McDonalds</b>
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6 Amount (\$) <b>27.54</b>	7 Payee address; <b>1120 Santa Ursula Laredo, TX. 78040</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/13/2020</b>	Payee name <b>Jack In The Box</b>
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Amount (\$) <b>21.14</b>	Payee address; <b>2612 Cortez Laredo, TX. 78040</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/14/2020</b>	Payee name <b>Pollo Feliz</b>
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Amount (\$) <b>58.97</b>	Payee address; <b>3614 San Dario Ave. Laredo, TX. 78040</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	

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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/15/2020</b>	5 Payee name <b>Popayes</b>
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6 Amount (\$) <b>78.98</b>	7 Payee address; <b>1602 Guadalupe Laredo, TX - 78043</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food / Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/16/2020</b>	Payee name <b>Chopsticks</b>
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Amount (\$) <b>35.80</b>	Payee address; <b>313 W. Village Laredo, TX 78046</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/16/2020</b>	Payee name <b>Stripes</b>
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Amount (\$) <b>+ 50.94</b>	Payee address; <b>602 Washington Laredo, TX - 78041</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10/17/2020</b>	5 Payee name <b>EXXON</b>	
6 Amount (\$) <b>10.49</b>	7 Payee address; <b>2501 S. Zapata Hwy Laredo, TX 78046</b>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Transportation</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <b>10/17/2020</b>	Payee name <b>Pizza Hut</b>
Amount (\$) <b>100.72</b>	Payee address; <b>2621 San Bernardo Laredo, TX 78040</b>
	City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <b>10/18/2020</b>	Payee name <b>Evelin Cruz</b>
Amount (\$) <b>110.00</b>	Payee address; <b>2117 Guaymas Laredo, TX 78043</b>
	City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **45**      2 FILER NAME: **Vidal Rodriguez**      3 Filer ID (Ethics Commission Filers):

4 Date: **10/18/2020**      5 Payee name: **Target**

6 Amount (\$): **45.47**      7 Payee address: **1910 Bob Bulls de Laredo, TX. 78044**  
City: State: Zip Code

8 PURPOSE OF EXPENDITURE: **Office Overhead**  
(a) Category (See Categories listed at the top of this schedule)      (b) Description  
(c)  Check if travel outside of Texas. Complete Schedule T.       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: **10/19/2020**      Payee name: **Stripes**

Amount (\$): **32.04**      Payee address: **1002 Santa Maria Ave Laredo, TX 78041**  
City: State: Zip Code

PURPOSE OF EXPENDITURE: **Transportation**  
Category (See Categories listed at the top of this schedule)      Description  
 Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH  
Candidate / Officeholder name      Office sought      Office held

Date: **10/19/2020**      Payee name: **Pollo Feliz**

Amount (\$): **26.24**      Payee address: **2658 Zapata Hwy Laredo, TX. 78046**  
City: State: Zip Code

PURPOSE OF EXPENDITURE: **Food/Beverage**  
Category (See Categories listed at the top of this schedule)      Description  
 Check if travel outside of Texas. Complete Schedule T.       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 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: <b>45</b>	2 FILER NAME: <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
4 Date: <b>10/20/2020</b>	5 Payee name: <b>Taquitos Ravi</b>	
6 Amount (\$): <b>48.20</b>	7 Payee address; City; State; Zip Code: <b>1420 Market St. Laredo, TX. 78041</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule): <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date: <b>10/21/2020</b>	Payee name: <b>Variety Meats</b>	
Amount (\$): <b>140.08</b>	Payee address; City; State; Zip Code: <b>3301 Comas del Sur Laredo, TX. 78044</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): <b>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	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date: <b>10/21/2020</b>	Payee name: <b>Exxon Mobil</b>	
Amount (\$): <b>16.07</b>	Payee address; City; State; Zip Code: <b>4420 S. Zapata Hwy Laredo, TX. 78044</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule): <b>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	
Complete ONLY 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  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10/22/2020</b>	5 Payee name <b>Red Lobster</b>	
6 Amount (\$) <b>73.91</b>	7 Payee address; <b>5315 San Dario Laredo, TX 78045</b>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>10/22/2020</b>	Payee name <b>Dollar Tree</b>	
Amount (\$) <b>2.17</b>	Payee address; <b>3702 US-Hwy 83-Laredo, TX 78046</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Printing 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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>10/23/2020</b>	Payee name <b>Little Caesars</b>	
Amount (\$) <b>54.13</b>	Payee address; <b>3706 US-Hwy 83 Laredo, TX 78046</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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
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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/24/2020</b>	5 Payee name <b>Starbucks</b>
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6 Amount (\$) <b>23.00</b>	7 Payee address; <b>5300 San Dario Laredo, TX. 78045</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/26/2020</b>	Payee name <b>Ringo's BBQ and Burg.</b>
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Amount (\$) <b>57.15</b>	Payee address; <b>5102 Hwy 359 Laredo, TX 78043</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/28/2020</b>	Payee name <b>7-Eleven</b>
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Amount (\$) <b>32.91</b>	Payee address; <b>6002 Wash. in Laredo, TX. 78046</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/30/2020</b>	5 Payee name <b>Nancy Castillo</b>
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6 Amount (\$) <b>100.00</b>	7 Payee address;  City; State; Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Funeral Donation</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/02/2020</b>	Payee name <b>Target</b>
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Amount (\$) <b>141.10</b>	Payee address; <b>1910 Bob Bullock Laredo, TX 78043</b>	City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>	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 <b>11/02/2020</b>	Payee name <b>Spirit Halloween</b>
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Amount (\$) <b>255.34</b>	Payee address; <b>4701 San Dario Laredo, TX 78045</b>	City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Halloween</b>
	<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 MADE 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **45**

2 FILER NAME **Vidal Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date **11/02/2020**

5 Payee name **McDonalds**

6 Amount (\$) **15.32**

7 Payee address; City; State; Zip Code  
**2301 Guadalupe Laredo, TX. 78043**

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)  
**Food/Beverage**

(b) Description

(c)  Check if travel outside of Texas. Complete Schedule T.

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name Office sought Office held

Date **11/02/2020**

Payee name **Stripes**

Amount (\$) **7.55**

Payee address; City; State; Zip Code  
**3920 Aquavieve Laredo, TX. 78043**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)  
**Food/Beverage**

Description

Check if travel outside of Texas. Complete Schedule T.

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name Office sought Office held

Date **11/03/2020**

Payee name **Taco Palenque**

Amount (\$) **25.74**

Payee address; City; State; Zip Code  
**3512 US Hwy 83 Laredo, TX. 78046**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)  
**Food/Beverage**

Description

Check if travel outside of Texas. Complete Schedule T.

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **45**      2 FILER NAME: **Vidal Rodriguez**      3 Filer ID (Ethics Commission Filers)

4 Date: **11/03/2020**      5 Payee name: **Amanda Ramos**

6 Amount (\$): **140.00**      7 Payee address; City: **Laredo, Tx.** State: **TX.** Zip Code: **7804**

8 PURPOSE OF EXPENDITURE: **Donation**  
(a) Category (See Categories listed at the top of this schedule)  
(b) Description

(c)  Check if travel outside of Texas. Complete Schedule T.       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: **11/04/2020**      Payee name: **Happy Burger Truck**

Amount (\$): **20.00**      Payee address; City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Category (See Categories listed at the top of this schedule): **Food/Beverage**      Description: \_\_\_\_\_

Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH  
Candidate / Officeholder name: \_\_\_\_\_ Office sought: \_\_\_\_\_ Office held: \_\_\_\_\_

Date: **11/05/2020**      Payee name: **Danny's Restaurant**

Amount (\$): **28.89**      Payee address; City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Category (See Categories listed at the top of this schedule): **Food/Beverage**      Description: \_\_\_\_\_

Check if travel outside of Texas. Complete Schedule T.       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 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>11/09/2020</b>	5 Payee name <b>Variety Meats</b>
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6 Amount (\$) <b>140.89</b>	7 Payee address; <b>3301 Lomas del Sur Laredo, Tx. 78046</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/09/2020</b>	Payee name <b>Circle K</b>
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Amount (\$) <b>78.07</b>	Payee address; <b>1601 Chihuahua St. Laredo, TX 78043</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/09/2020</b>	Payee name <b>Dominos</b>
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Amount (\$) <b>70.45</b>	Payee address; <b>1920 Thurman Laredo, Tx 78046</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	

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.

<b>1</b> Total pages Schedule F1: <b>45</b>	<b>2</b> FILER NAME: <b>Vidal Rodriguez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date: <b>11/10/2020</b>	<b>5</b> Payee name: <b>Target</b>	
<b>6</b> Amount (\$): <b>57.33</b>	<b>7</b> Payee address; City; State; Zip Code: <b>1910 Bob Bullock Laredo, TX. 78043</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule): <b>Office Overhead</b>	<b>(b)</b> Description:
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <b>11/11/2020</b>	<b>Payee name</b> <b>Buffalo Wild Wings</b>	
<b>Amount (\$)</b> <b>54.81</b>	<b>Payee address; City; State; Zip Code</b> <b>4629 San Dario Laredo, TX 78046</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule): <b>Food/Beverage</b>	<b>Description</b>
	<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
<b>Date</b> <b>11/11/2020</b>	<b>Payee name</b> <b>La Vida Meals</b>	
<b>Amount (\$)</b> <b>17.32</b>	<b>Payee address; City; State; Zip Code</b> <b>4528 Del Mar Laredo, TX. 78041</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule): <b>Food/Beverage</b>	<b>Description</b>
	<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 MADE 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **45**      2 FILER NAME **Vidal Rodriguez**      3 Filer ID (Ethics Commission Filers)

4 Date **11/13/2020**      5 Payee name **Longhorn Steakhouse**

6 Amount (\$) **42.00**      7 Payee address;      City;      State;      Zip Code

**5301 San Dario Laredo TX 78041**

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) **Food Beverage**      (b) Description

(c)  Check if travel outside of Texas. Complete Schedule T.       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 **11/14/2020**      Payee name **Peter Piper Pizza**

Amount (\$) **20.32**      Payee address;      City;      State;      Zip Code

**4411 US-Hwy 83 Laredo, TX. 78046**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule) **Food / Beverage**      Description

Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name      Office sought      Office held

Date **11/14/2020**      Payee name **Dairy Queen**

Amount (\$) **9.07**      Payee address;      City;      State;      Zip Code

**1701 Guadalupe Laredo, TX. 78040**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule) **Food / Beverage**      Description

Check if travel outside of Texas. Complete Schedule T.       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 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: <b>45</b>	2 FILER NAME <b>Uidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>11/15/2020</b>	5 Payee name <b>Starbucks</b>
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6 Amount (\$) <b>32.53</b>	7 Payee address; <b>1910 Bob Bullock Ln Laredo, TX 72043</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/23/2020</b>	Payee name <b>Popeys</b>
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Amount (\$) <b>82.68</b>	Payee address; <b>1200 Fairway Ln Laredo, TX 72044</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/23/2020</b>	Payee name <b>Stripes</b>
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Amount (\$) <b>31.44</b>	Payee address; <b>3710 Lomas del Sur Laredo, TX 72046</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>11/24/2020</b>	5 Payee name <b>Texas Roadhouse</b>	
6 Amount (\$) <b>56.<sup>12</sup></b>	7 Payee address: <b>5722 San Bernardo Laredo, Tx. 78040</b>	City: State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food / Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>12/07/2020</b>	Payee name <b>Variety Meats</b>	
Amount (\$) <b>119.94</b>	Payee address: <b>3301 Lomas del Sur Laredo, Tx. 78046</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>12/07/2020</b>	Payee name <b>Academy</b>	
Amount (\$) <b>125.53</b>	Payee address: <b>5720 San Dario Laredo, Tx. 78040</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	
Complete ONLY 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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | 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: 45	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 12/07/2020	5 Payee name Rudely's BBA
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6 Amount (\$) 43.00	7 Payee address; 7305 McPherson Rd Laredo, TX. 78048	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/08/2020	Payee name Target
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Amount (\$) 403.20	Payee address; 1910 Bob Bullack Laredo, TX. 78043	City;	State;	Zip Code
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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

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/08/2020	Payee name Chocobitka
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Amount (\$) 63.17	Payee address; 2202 Guadalupe Laredo, TX. 78043	City;	State;	Zip Code
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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

Complete ONLY 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.

<b>1</b> Total pages Schedule F1: <u>45</u>	<b>2</b> FILER NAME <u>Vidal Rodriguez</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>12/10/2020</u>	<b>5</b> Payee name <u>Disney Store</u>	
<b>6</b> Amount (\$) <u>107.41</u>	<b>7</b> Payee address; City; State; Zip Code <u>5300 San Dario Laredo, TX. 78040</u>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <u>Event Expense</u>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <u>12/10/2020</u>	Payee name <u>Mariscos La Laxuna</u>		
Amount (\$) <u>70.33</u>	Payee address; City; State; Zip Code <u>41205 Jaime Zapata Laredo, TX. 78043</u>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <u>Food / Beverage</u>	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 <u>12/11/2020</u>	Payee name <u>Whata Burger</u>		
Amount (\$) <u>5.56</u>	Payee address; City; State; Zip Code <u>811 Riverhill Laredo, TX. 78046</u>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <u>Food / Beverage</u>	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 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>12/11/2020</b>	5 Payee name <b>Tanitas Rayni</b>
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6 Amount (\$) <b>47.63</b>	7 Payee address; City; State; Zip Code <b>1420 Market St Laredo, Tx. 78043</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/12/2020</b>	Payee name <b>Circle K</b>
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Amount (\$) <b>34.00</b>	Payee address; City; State; Zip Code <b>1601 Chipmunk Laredo Tx. 78046</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/12/2020</b>	Payee name <b>Variety Meats</b>
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Amount (\$) <b>102.73</b>	Payee address; City; State; Zip Code <b>3301 Lomas del Sur Laredo, Tx. 78046</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY 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: <b>45</b>	2 FILER NAME: <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>12/14/2020</b>	5 Payee name <b>CircleK</b>
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6 Amount (\$) <b>36.<sup>31</sup></b>	7 Payee address; <b>1601 Chihuahua Laredo, TX 78400</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Transportation</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/14/2020</b>	Payee name <b>Target</b>
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Amount (\$) <b>13.<sup>07</sup></b>	Payee address; <b>1910 Bob Bullock Loop. Laredo TX 78403</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/15/2020</b>	Payee name <b>Logans</b>
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Amount (\$) <b>37.<sup>41</sup></b>	Payee address; <b>5300 San Davio Ave Laredo TX 78400</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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

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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>12/16/2020</b>	5 Payee name <b>Taco Palanque</b>
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6 Amount (\$) <b>42.03</b>	7 Payee address; City; State; Zip Code <b>3512 Hwy 83 Laredo, TX. 78046</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/17/2020</b>	Payee name <b>Stripes</b>
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Amount (\$) <b>33.64</b>	Payee address; City; State; Zip Code <b>3920 Aquonieve Laredo, TX. 78043</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/17/2020</b>	Payee name <b>Taqueritos Ravi</b>
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Amount (\$) <b>30.29</b>	Payee address; City; State; Zip Code <b>1420 Market Laredo, TX. 78043</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>12/21/2020</b>	5 Payee name <b>Starbucks</b>
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6 Amount (\$) <b>5.57</b>	7 Payee address; City; State; Zip Code <b>5300 San Davido Laredo, TX. 78046</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/21/2020</b>	Payee name <b>WhataBurger</b>
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Amount (\$) <b>17.97</b>	Payee address; City; State; Zip Code <b>811 Riverhill Laredo, TX. 78046</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/22/2020</b>	Payee name <b>Dannys Restaurant</b>
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Amount (\$) <b>42.93</b>	Payee address; City; State; Zip Code <b>5120 Hwy 359 Laredo, TX. 78043</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete ONLY 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: 45      2 FILER NAME Vidal Rodriguez      3 Filer ID (Ethics Commission Filers)

4 Date 12/28/2020      5 Payee name La Laguna

6 Amount (\$) 47.63      7 Payee address; City; State; Zip Code  
4205 Jaime Zapata Laredo, TX - 78043

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
<u>Food/Beverage</u>	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH      Candidate / Officeholder name      Office sought      Office held

Date 12/23/2020      Payee name Wingstop

Amount (\$) 41.74      Payee address; City; State; Zip Code  
9415 Hwy 83 Laredo, TX. 78046

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
<u>Food/Beverage</u>	
<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 12/23/20      Payee name Target

Amount (\$) 86.56      Payee address; City; State; Zip Code  
1910 Bob Bullock Lp Laredo TX. 78043

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
<u>Event Expense</u>	
<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 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.

<b>1</b> Total pages Schedule F1: <u>45</u>	<b>2</b> FILER NAME <u>Vidal Rodriguez</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>12/23/2020</u>	<b>5</b> Payee name <u>Casa Raul</u>	
<b>6</b> Amount (\$) <u>503.<sup>15</sup></u>	<b>7</b> Payee address; City; State; Zip Code <u>5719 San Dario Ne Laredo, TX, 78040</u>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	
	<b>(b)</b> Description	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <u>12/24/2020</u>	Payee name <u>Danny's Restaurant</u>	
Amount (\$) <u>65.<sup>23</sup></u>	Payee address; City; State; Zip Code <u>1426 N. Malinche Laredo, TX, 78043</u>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	
	Description <u>Food / Beverage</u>	
	<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 <u>12/28/2020</u>	Payee name <u>Variety Meats</u>	
Amount (\$) <u>108.<sup>08</sup></u>	Payee address; City; State; Zip Code <u>3301 Lomas Del Sur Laredo, TX 78046</u>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	
	Description <u>Food / Beverage</u>	
	<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 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>12/28/20</b>	5 Payee name <b>H-E-B</b>	
6 Amount (\$) <b>8.82</b>	7 Payee address; City; State; Zip Code <b>2314 S. Zapata Hwy Laredo, TX. 78046</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <b>12/29/20</b>	Payee name <b>Jack In The Box</b>	
Amount (\$) <b>40.02</b>	Payee address; City; State; Zip Code <b>402 Hwy 83 Laredo, TX. 78046</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <b>12/29/20</b>	Payee name <b>Starbucks</b>	
Amount (\$) <b>22.03</b>	Payee address; City; State; Zip Code <b>1910 Bob Bullock Cp. Laredo, TX. 78046</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	
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 Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>45</u>	2 FILER NAME <u>Vidal Rodriguez</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>12/30/20</u>	5 Payee name <u>Red Lobster</u>	
6 Amount (\$) <u>18.67</u>	7 Payee address; <u>5300 San Davio Ave. Laredo, TX. 78041</u>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Food/Beverage</u>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <u>12/30/20</u>	Payee name <u>Los Jacales</u>	
Amount (\$) <u>11.04</u>	Payee address; <u>620 Guadalupe St - Laredo, TX. 78040</u>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Food/Beverage</u>	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 <u>12/31/20</u>	Payee name <u>Applebee's</u>	
Amount (\$) <u>26.34</u>	Payee address; <u>10719 International Blvd. Laredo, TX. 78040</u>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Food/Beverage</u>	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 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: <i>45</i>	2 FILER NAME <i>Vidal Rodriguez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/31/2020</i>	5 Payee name <i>Jesus A. Cruz</i>	
6 Amount (\$) <i>500.00</i>	7 Payee address; City; State; Zip Code <i>2117 Guaymas Laredo, TX, 78043</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Donation</i>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>1/04/2021</i>	Payee name <i>Rochas Restaurant</i>	
Amount (\$) <i>16.04</i>	Payee address; City; State; Zip Code <i>Laredo TX, 78045</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food / Beverage</i>	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 <i>01/04/21</i>	Payee name <i>H-E-B Plus</i>	
Amount (\$) <i>61.95</i>	Payee address; City; State; Zip Code <i>McPherson rd Laredo, TX, 78045</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food / Beverage</i>	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 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>01/05/21</b>	5 Payee name <b>Texas Roadhouse</b>
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6 Amount (\$) <b>32.17</b>	7 Payee address; City; State; Zip Code <b>San Dario Laredo, TX. 78041</b>
-------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/06/21</b>	Payee name <b>Target</b>
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Amount (\$) <b>109.70</b>	Payee address; City; State; Zip Code <b>1916 Bob Bullock Lp. Laredo, TX. 78043</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>	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 <b>01/07/21</b>	Payee name <b>Pump N Shop</b>
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Amount (\$) <b>56.67</b>	Payee address; City; State; Zip Code <b>4801 San Bernards Laredo, TX. 7804</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>01/09/21</b>	5 Payee name <b>EXXON</b>
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6 Amount (\$) <b>21.19</b>	7 Payee address; City; State; Zip Code <b>2501 US-Hwy 83 Laredo, TX. 78044</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Transportation</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/11/21</b>	Payee name <b>Loves Travel</b>
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Amount (\$) <b>39.81</b>	Payee address; City; State; Zip Code <b>101 Pinnacle Rd Laredo, TX. 78045</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/11/21</b>	Payee name <b>Papeyes</b>
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Amount (\$) <b>19.77</b>	Payee address; City; State; Zip Code <b>2307 S. Zapata Hwy Laredo, TX 78046</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>01/12/21</b>	5 Payee name <b>Variety Meats</b>
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6 Amount (\$) <b>24.30</b>	7 Payee address; City; State; Zip Code <b>3301 Lomas del Sur Laredo TX. 78044</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/13/21</b>	Payee name <b>Whataburger</b>
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Amount (\$) <b>22.49</b>	Payee address; City; State; Zip Code <b>801 Riverhill dr. Laredo TX. 78044</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/13/21</b>	Payee name <b>Target</b>
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Amount (\$) <b>51.81</b>	Payee address; City; State; Zip Code <b>1916 Bob Bullock Laredo TX. 78043</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>	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 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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | 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: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>01/14/21</b>	5 Payee name <b>Chick-Fil-A</b>
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6 Amount (\$) <b>24.00</b>	7 Payee address; <b>1910 Bob Bullard Laredo TX. 78046</b>	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food Beverage</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/15/21</b>	Payee name <b>Dairy Queen</b>
-------------------------	----------------------------------

Amount (\$) <b>19.58</b>	Payee address; <b>1701 Guadalupe Laredo TX. 78040</b>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/16/21</b>	Payee name <b>Chilis</b>
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Amount (\$) <b>40.00</b>	Payee address; <b>5702 San David Laredo, TX 78041</b>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>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	

Complete ONLY 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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: 45	2 FILER NAME Vidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 01/10/21	5 Payee name Charlies Coronc
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6 Amount (\$) 34.62	7 Payee address; 3902 San Bernarde, Laredo, TX 7840	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Food/Beverage	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 01/19/21	Payee name Variety Meats
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Amount (\$) 84.11	Payee address; Lomas del Sur 3301 Variety Meats Laredo, TX 78406	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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
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Date 01/20/21	Payee name Pizza Hut
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Amount (\$) 51.49	Payee address; 2119 Pine St Laredo, TX 78406	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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
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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: <i>45</i>	2 FILER NAME <i>Vidal Rodriguez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>01/20/21</i>	5 Payee name <i>Starbucks</i>
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6 Amount (\$) <i>5.36</i>	7 Payee address; City; State; Zip Code <i>5400 San Dario Laredo, TX. 78041</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food/Beverage</i>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01/22/21</i>	Payee name <i>Stripes</i>
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Amount (\$) <i>37.00</i>	Payee address; City; State; Zip Code <i>3920 Aquanieve Laredo, TX. 78044</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Transportation</i>	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 <i>01/25/21</i>	Payee name <i>H-E-B</i>
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Amount (\$) <i>19.08</i>	Payee address; City; State; Zip Code <i>2301 US Hwy 83 Laredo, TX. 78046</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food/Beverage</i>	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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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: 45	2 FILER NAME Uidal Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 01/28/21	5 Payee name McDonalds
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6 Amount (\$) 7.33	7 Payee address; 2502 US-83-Laredo, TX 78040	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Food/Beverage	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 01/26/21	Payee name Danny's Restaurant
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Amount (\$) 43.93	Payee address; 5120 Hwy 359 Laredo, TX 78040	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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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Date 01/27/21	Payee name La Vida Fit Meals Restaurant
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Amount (\$) 54.13	Payee address; 6528 Del Mar Laredo, TX 78041	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	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 MADE 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 Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>45</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>01/28/21</b>	5 Payee name <b>Circle K</b>	
6 Amount (\$) <b>10.07</b>	7 Payee address; <b>102 Cielito Lindo Laredo, TX 7804</b>	City; State; Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Transportation</b>	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>01/29/21</b>	Payee name <b>Mc Donalds</b>	
Amount (\$) <b>17.35</b>	Payee address; <b>2502 US-Hwy 83 Laredo, TX. 78046</b>	City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$)	Payee address;	City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <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.

<b>1</b> Total pages Schedule F1: <u>45</u>	<b>2</b> FILER NAME <u>Vidal Rodriguez</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>09/18/21</u>	<b>5</b> Payee name <u>Variety Meats</u>	
<b>6</b> Amount (\$) <u>143.74</u>	<b>7</b> Payee address; City; State; Zip Code <u>3301 Lomas del Sur Laredo, TX 78044</u>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <u>Food/Beverage</u>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <u>12/22/21</u>	<b>Payee name</b> <u>Brisket and Beer</u>	
<b>Amount (\$)</b> <u>20.38</u>	<b>Payee address; City; State; Zip Code</b> <u>2002 Chihuahua Laredo, TX 78043</u>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <u>Food/Beverage</u>	<b>Description</b>
	<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
<b>Date</b> <u>10/22/21</u>	<b>Payee name</b> <u>H-E-B</u>	
<b>Amount (\$)</b> <u>100.54</u>	<b>Payee address; City; State; Zip Code</b> <u>2314 US-Hwy 83 Laredo, TX 78044</u>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <u>Food/Beverage</u>	<b>Description</b>
	<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 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: 45	2 FILER NAME Victor Rodriguez	3 Filer ID (Ethics Commission Filers)
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4 Date 12/23/21	5 Payee name Dollar Tree
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6 Amount (\$) 9.74	7 Payee address; City; State; Zip Code 3702 US-83 Laredo, TX. 78046
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/24/21	Payee name La Laguna
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Amount (\$) 56.03	Payee address; City; State; Zip Code 4205 Jamie Zapata Hwy 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

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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