

# 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;">24</span>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST LAST MI SUFFIX <span style="font-size: 1.5em; color: blue;">Vidal Rodriguez</span>	<b>OFFICE USE ONLY</b> Date Received <div style="border: 1px solid black; padding: 5px; text-align: center;">                     RECEIVED                      2018 DEC -5 PM 4:45                      CITY SECRETARY'S OFFICE                 </div> 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: 1.2em; color: blue;">3001 Pecos Plaza Laredo, TX 78046</span>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <span style="font-size: 1.2em; color: blue;">(956) 267-091</span>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST LAST MI SUFFIX <span style="font-size: 1.5em; color: blue;">Daisy Campos</span>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <span style="font-size: 1.2em; color: blue;">3001 Pecos Plaza Laredo, TX. 78046</span>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <span style="font-size: 1.2em; color: blue;">(956) 284-9601</span>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    Month Day Year <span style="font-size: 1.5em; color: blue;">10 / 30 / 2018</span> THROUGH <span style="font-size: 1.5em; color: blue;">12 / 03 / 2018</span>		
11 ELECTION	ELECTION DATE Month Day Year <span style="font-size: 1.2em; color: blue;">12 / 13 / 2018</span>	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" 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: 1.2em; color: blue;">City of Laredo Councilman District 2</span>	13 OFFICE SOUGHT (if known) <span style="font-size: 1.2em; color: blue;">City Councilman District 2</span>	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Vidal Rodriguez 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

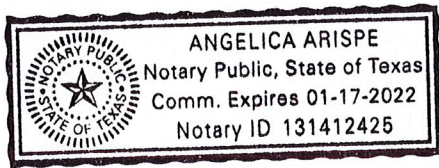
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,541.95
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,625.57
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 3,460.40
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 AFFIDAVIT



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

[Signature]  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Vidal Rodriguez, this the 5 day of December, 2018, 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

# SUBTOTALS - COH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <i>Vidal Rodriguez</i>		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>5,250<sup>00</sup></i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>6,291<sup>95</sup></i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ <i>5,625<sup>57</sup></i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **2**

2 FILER NAME

**Vidal Rodriguez**

3 Filer ID (Ethics Commission Filers)

4 Date

**11/07/18**

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

**East Laredo Home**

7 Amount of contribution (\$)

**\$125.00**

6 Contributor address; City; State; Zip Code

**P.O. Box 450050 Laredo, TX 78045**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**11/07/18**

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

**Daniel D. Wiers**

Amount of contribution (\$)

**\$125.00**

Contributor address; City; State; Zip Code

**2401 Littler CTPH Laredo, TX 78045**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**11/9/18**

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

**Jose A. Becerra Adnana Becerra**

Amount of contribution (\$)

**\$1,500.00**

Contributor address; City; State; Zip Code

**307 Regal Dr. Laredo, TX 78041**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**11/9/18**

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

**Amely Juarez**

Amount of contribution (\$)

**\$1,500.00**

Contributor address; City; State; Zip Code

**1800 Country Club Laredo, TX 78045**  
**APT. 7**

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:

2 FILER NAME

Vidal Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

11/9/18

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

Jose A. Becerra & Adriana I. Becerra

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address; City; State; Zip Code

307 Regal Dr. Laredo, Tx. 78041

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/20/18

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

Fernando D. Laurel Jr.

Amount of contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

P.O. Box 1902 Laredo, TX. 78044

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)

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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>1</b>	
2 FILER NAME <b>Vidal Rodriguez</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>10-30-18</b> <b>12/3/18</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Laredo Fire PAC</b>	8 Amount of Contribution \$ <b>61291.95</b>	9 In-kind contribution description <b>Labor (black walking)</b> <b>Food/Beverage printing.</b>
7 Contributor address; City; State; Zip Code <b>5219 Tesoro Plaza Laredo, Tx. 78041</b>		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 18	<b>2</b> FILER NAME Vidal Rodriguez	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/30/18	<b>5</b> Payee name Walmart	
<b>6</b> Amount (\$) 31.40	<b>7</b> Payee address; City; State; Zip Code 4401 S. Zapata Hwy Laredo, TX. 78046	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

**9** Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date 10/30/18	Payee name Marvaez	
Amount (\$) 87.10	Payee address; City; State; Zip Code 219 S. Zapata Hwy Laredo, TX. 78043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date 10/30/18	Payee name H-E-B	
Amount (\$) 31.25	Payee address; City; State; Zip Code 2314 S. Zapata Hwy Laredo, TX. 78046	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>18</u>	<b>2</b> FILER NAME <u>Vidal Rodriguez</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>10/30/18</u>	<b>5</b> Payee name <u>Jose Vargas / Prada Elementary Jamaica</u>	
<b>6</b> Amount (\$) <u>250.00</u>	<b>7</b> Payee address; City; State; Zip Code <u>510 Sofia Dr. Laredo, TX. 78046</u>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Donation</u>	<b>(b)</b> Description <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>10/31/18</u>	Payee name <u>Chick-Fil-A</u>	
Amount (\$) <u>19.47</u>	Payee address; City; State; Zip Code <u>1916 Bob Bullock 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>10/31/18</u>	Payee name <u>Sams Club</u>	
Amount (\$) <u>91.86</u>	Payee address; City; State; Zip Code <u>4810 San Bernardo Laredo, TX. 78041</u>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <u>Event Expense</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 _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>18</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/31/18</b>	5 Payee name <b>McDonalds</b>
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6 Amount (\$) <b>79.82</b>	7 Payee address; City; State; Zip Code <b>2502 S. Zapata Hwy Laredo, TX. 78046</b>
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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 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/31/18</b>	Payee name <b>HERB</b>
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Amount (\$) <b>28.09</b>	Payee address; City; State; Zip Code <b>2314 S. Zapata Hwy Laredo, TX. 78046</b>
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/01/18</b>	Payee name <b>Tortilleria Mendoc</b>
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Amount (\$) <b>25.95</b>	Payee address; City; State; Zip Code <b>3919 Jaime Zapata Memorial Hwy Laredo, TX. 78043</b>
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>18</u>	<b>2</b> FILER NAME <u>Vidal Rodriguez</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>11/01/18</u>	<b>5</b> Payee name <u>Family Dollar</u>	
<b>6</b> Amount (\$) <u>14.<sup>99</sup></u>	<b>7</b> Payee address; City; State; Zip Code <u>2905 S. Zapata Hwy Laredo, TX. 78046</u>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Office Overhead</u>	<b>(b)</b> Description <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>11/01/18</u>	Payee name <u>McDonalds</u>	
Amount (\$) <u>5.<sup>44</sup></u>	Payee address; City; State; Zip Code <u>2500 S. Zapata Hwy 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 _____	

Date <u>11/01/18</u>	Payee name <u>Dollar General</u>	
Amount (\$) <u>22.<sup>13</sup></u>	Payee address; City; State; Zip Code <u>3800 S. Zapata Hwy Laredo, TX.</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 _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>18</b>	<b>2</b> FILER NAME <b>Vidal Rodriguez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/02/18</b>	<b>5</b> Payee name <b>Orlando's Snack</b>	
<b>6</b> Amount (\$) <b>60.80</b>	<b>7</b> Payee address; City; State; Zip Code <b>1301 Blaine St. 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>Food/Beverage</b>	<b>(b)</b> Description <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 <b>11/02/18</b>	Payee name <b>Stripes</b>	
Amount (\$) <b>5.89</b>	Payee address; City; State; Zip Code <b>3710- US-83 Laredo, TX. 78046</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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date <b>11/02/18</b>	Payee name <b>Peter Piper Pizza</b>	
Amount (\$) <b>60.49</b>	Payee address; City; State; Zip Code <b>4411 Hwy 83 Laredo, TX. 78046</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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 18	<b>2</b> FILER NAME Vidal Rodriguez	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/02/18	<b>5</b> Payee name McDonalds	
<b>6</b> Amount (\$) 21. <sup>49</sup>	<b>7</b> Payee address; City; State; Zip Code 2502 S. Zapata Hwy Laredo, TX - 78046	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage	<b>(b)</b> Description <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 11/02/18	Payee name Narvaez	
Amount (\$) 70. <sup>01</sup>	Payee address; City; State; Zip Code 219 S. Zapata Hwy Laredo, TX. 78043	
<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: _____	

Date 11/05/18	Payee name El Taco Totc	
Amount (\$) 25. <sup>76</sup>	Payee address; City; State; Zip Code 1701 Norton St, Laredo, TX. 78046	
<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: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>18</i>	<b>2</b> FILER NAME <i>Vidal Rodriguez</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/05/18</i>	<b>5</b> Payee name <i>Mundo Publicitario</i>	
<b>6</b> Amount (\$) <i>450.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>Ocampo 2002 Apostol, Nuevo Laredo, Tams 88246</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <i>Advertising</i>	<b>(b)</b> Description <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 <i>11/06/18</i>	Payee name <i>H-E-B</i>	
Amount (\$) <i>89.72</i>	Payee address; City; State; Zip Code <i>2314 Zapata Hwy Laredo, TX 78046</i>	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>11/07/18</i>	Payee name <i>El Pollo Feliz</i>	
Amount (\$) <i>19.48</i>	Payee address; City; State; Zip Code <i>2604 S. Zapata Hwy Laredo, TX 78046</i>	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 18	<b>2</b> FILER NAME Vidal Rodriguez	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/05/18	<b>5</b> Payee name KFC	
<b>6</b> Amount (\$) 78.45	<b>7</b> Payee address; City; State; Zip Code 2600 S. Zapata Hwy Laredo, TX	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage	<b>(b)</b> Description <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
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Date 11/05/18	Payee name Tony Romas		
Amount (\$) 125.00	Payee address; City; State; Zip Code 5300 San Dario Laredo, TX. 78041		
<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 11/05/18	Payee name Falcon Bank "Dep Item Ret Charge"		
Amount (\$) 24.00	Payee address; City; State; Zip Code 212 Bob Bulluck Lp. Laredo, TX. 78043		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Banking	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 18	<b>2</b> FILER NAME Vidal Rodriguez	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/08/18	<b>5</b> Payee name Taco Maiz	
<b>6</b> Amount (\$) 15.00	<b>7</b> Payee address; City; State; Zip Code 1301 US-83 Laredo, TX. 78046	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage	<b>(b)</b> Description <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 11/13/18	Payee name H-E-B	
Amount (\$) 164.84	Payee address; City; State; Zip Code 2314 S. Zapata Hwy Laredo, TX. 78046	
<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	

Date 11/13/18	Payee name Sams Club	
Amount (\$) 24.00	Payee address; City; State; Zip Code 4816 San Bernardo Laredo, TX. 78041	
<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 FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>14</u>	<b>2</b> FILER NAME <u>Vidal Rodriguez</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>11/14/18</u>	<b>5</b> Payee name <u>Danny's Restaurant</u>	
<b>6</b> Amount (\$) <u>37.00</u>	<b>7</b> Payee address; City; State; Zip Code <u>4450 S. Zapata Hwy Laredo, TX. 78046</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 <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>11/15/18</u>	Payee name <u>Palenque Grill</u>	
Amount (\$) <u>81.00</u>	Payee address; City; State; Zip Code <u>4815 San Bernardo Laredo, TX. 78041</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>11/16/18</u>	Payee name <u>Stripes</u>	
Amount (\$) <u>41.25</u>	Payee address; City; State; Zip Code <u>3900 Aguanieve Laredo, TX. 78046</u>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <u>Transportation</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 FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>18</i>	<b>2</b> FILER NAME <i>Vidal Rodriguez</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/16/18</i>	<b>5</b> Payee name <i>La Carreta Carnes Asadas</i>	
<b>6</b> Amount (\$) <i>137.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>9109 McPherson Rd Laredo, TX. 78045</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>	<b>(b)</b> Description <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 <i>11/19/18</i>	Payee name <i>H-E-B</i>	
Amount (\$) <i>6.98</i>	Payee address; City; State; Zip Code <i>2314 S. Zapata Hwy Laredo, TX. 78046</i>	
<b>PURPOSE OF EXPENDITURE</b>	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>11/19/18</i>	Payee name <i>Stripes</i>	
Amount (\$) <i>33.00</i>	Payee address; City; State; Zip Code <i>3710 US-83 Laredo, TX. 78046</i>	
<b>PURPOSE OF EXPENDITURE</b>	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages, Schedule F1: <i>18</i>	<b>2</b> FILER NAME <i>Vidal Rodriguez</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/19/18</i>	<b>5</b> Payee name <i>EI Capatar</i>	
<b>6</b> Amount (\$) <i>94.70</i>	<b>7</b> Payee address; City; State; Zip Code <i>7220 Bob Bullock Laredo TX. 78041</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <i>Food/Beverage</i>	<b>(b)</b> Description <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 <i>11/20/18</i>	Payee name <i>Jack in the Box</i>	
Amount (\$) <i>65.69</i>	Payee address; City; State; Zip Code <i>4500 S. Zapata Hwy Laredo, TX. 78046</i>	
<b>PURPOSE OF EXPENDITURE</b>	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>11/20/18</i>	Payee name <i>Victor Tijerina</i>	
Amount (\$) <i>300.00</i>	Payee address; City; State; Zip Code <i>5544 Marble Falls Laredo, TX. 78046</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <i>Donation</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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 18	<b>2</b> FILER NAME Vidal Rodriguez	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 11/23/18	<b>5</b> Payee name Tacositos Ravei
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<b>6</b> Amount (\$) 50. <sup>07</sup>	<b>7</b> Payee address; City; State; Zip Code 1420 Market Laredo, TX. 78046
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/23/18	Payee name Stripes
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Amount (\$) 36. <sup>00</sup>	Payee address; City; State; Zip Code 37 US-83 Laredo, TX. 78046
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Transportation	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/26/18	Payee name Danni's Restaurant
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Amount (\$) 69. <sup>11</sup>	Payee address; City; State; Zip Code 4450 S. Zapata Hwy Laredo, TX. 780
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>15</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>11/27/18</b>	5 Payee name <b>Pizza Hut</b>
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6 Amount (\$) <b>36.21</b>	7 Payee address; City; State; Zip Code <b>2119 Pine St Laredo TX. 78046</b>
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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 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/27/18</b>	Payee name <b>Walmart</b>
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Amount (\$) <b>130.00</b>	Payee address; City; State; Zip Code <b>4401 US-83 Laredo, TX. 78046</b>
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/29/18</b>	Payee name <b>Lyndon B. Johnson High School</b>
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Amount (\$) <b>125.00</b>	Payee address; City; State; Zip Code <b>5626 Cielito Lindo Laredo, TX. 78046</b>
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<b>PURPOSE OF EXPENDITURE</b>	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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>18</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>11/29/18</b>	5 Payee name <b>Burger King</b>
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6 Amount (\$) <b>29.83</b>	7 Payee address; City; State; Zip Code <b>4407 US-83 Laredo, TX 78046</b>
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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 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>11/30/18</b>	Payee name <b>Naomi Robles</b>
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Amount (\$) <b>150.00</b>	Payee address; City; State; Zip Code <b>2802 S. Malinche Laredo, TX 7804</b>
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/1/18</b>	Payee name <b>Stripes</b>
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Amount (\$) <b>35.00</b>	Payee address; City; State; Zip Code <b>3710- US- 83 Laredo, TX 78046</b>
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>18</u>		<b>2</b> FILER NAME <u>Vidal Rodriguez</u>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <u>12/1/18</u>		<b>5</b> Payee name <u>Walmart</u>			
<b>6</b> Amount (\$) <u>62.38</u>		<b>7</b> Payee address; City; State; Zip Code <u>4401 US-83 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>Office Overhead</u>		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<p><b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH</p> <p>Candidate / Officeholder name _____ Office sought _____ Office held _____</p>				
Date <u>12/1/18</u>		Payee name <u>Pollo Feliz</u>			
Amount (\$) <u>38.95</u>		Payee address; City; State; Zip Code <u>2604 S Zapata<sup>MM</sup> 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		
	<p>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</p> <p>Candidate / Officeholder name _____ Office sought _____ Office held _____</p>				
Date <u>12/1/18</u>		Payee name <u>Texas Roadhouse</u>			
Amount (\$) <u>170.00</u>		Payee address; City; State; Zip Code <u>5722 San Bernardo Laredo, TX. 78041</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		
	<p>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</p> <p>Candidate / Officeholder name _____ Office sought _____ Office held _____</p>				

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>18</b>	2 FILER NAME <b>Vidal Rodriguez</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>12/2/18</b>	5 Payee name <b>Dominos Pizza</b>
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6 Amount (\$) <b>54.94</b>	7 Payee address; City; State; Zip Code <b>1920 Thurman Laredo, TX. 78046</b>
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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 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/3/18</b>	Payee name <b>Daniel Vargas</b>
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Amount (\$) <b>100.00</b>	Payee address; City; State; Zip Code <b>137 North Ave. Laredo, TX. 78045</b>
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<b>PURPOSE OF EXPENDITURE</b>	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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>12/3/18</b>	Payee name <b>Lamar Advertising</b>
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Amount (\$) <b>1,500.00</b>	Payee address; City; State; Zip Code <b>5543 State Hwy 359 Laredo, TX. 78043</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising</b>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>18</b>	<b>2</b> FILER NAME <b>Vidal Rodriguez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/18</b>	<b>5</b> Payee name <b>Margarita Gonzalez</b>	
<b>6</b> Amount (\$) <b>60.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>122 Pamplona Laredo, Tx. 78046</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Donation</b>	<b>(b)</b> Description <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 <b>11/23/18</b>	Payee name <b>Vista Print</b>	
Amount (\$) <b>254.47</b>	Payee address; City; State; Zip Code <b>95 Hayden Av. Lexington, MA 02401</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising/Printing exp.</b>	Description <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	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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