FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00058460 10 CANDIDATE / MS/MRS/MR FIRST OFFICE USE ONLY **OFFICEHOLDER** The Honorable Janet L. NAME Date Received 3:108m **NICKNAME** LAST **SUFFIX CAMERON COUNTY DEPARTMENT OF ELECTIONS &** Leal **VOTER REGISTRATION** CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** IAN 155 Candlewick MAILING Receipt # **ADDRESS** Change of Address Brownsville, TX 78521 **CAMPAIGN** MS/MRS/MR **FIRST** MI **TREASURER** Chester R. NAME **NICKNAME** LAST **SUFFIX** Gonzalez **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE CITY; **TREASURER** 117 E. Price Rd. **ADDRESS** (Residence or Business) Brownsville, TX 78520 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 550-9550 **PHONE** REPORT **TYPE** 15th day after campaign treasurer January 15 30th day before election Runoff Х appointment (officeholder only) 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) July 15 PERIOD Month Month Day Year Day Year COVERED **THROUGH** 12/31/2015 07/01/2015 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Primary Other General Special 12 OFFICE SOUGHT (if known) 11 OFFICE OFFICE HELD (if any) District Judge District 103Cameron District Judge District 103 **GO TO PAGE 2**

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 10

13 C / OH NAME	Leal, Janet L. (The H	onorable)	14 Filer ID 00058460	(Ethics Commission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or offic	ceholder's knowledge or					
Additional Pages	COMMITTEE TYPE								
	GENERAL	COMMITTEE ADDRESS							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
16 CONTIBUTION TOTALS	THAN PLEDGES,	\$ 0.00							
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00					
EXPENDITURE TOTALS		AL EXPENDITURES OF \$100 OR LESS, UNLESS		\$ 0.00					
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 6,248.67					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 34,357.19					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00					
17 AFFADAVIT		l swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.							
JUDITH E KRAUSE Notary Public, State of Texas My Commission Expires 02-05-2019 Signature of Candidate or Officeholder									
	AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said								
Sworn to and subso		ertify which, witness my hand and seal of office.	, this the /	day					
Signature of office	E Krause eer administering oath	Printed name of officer administering oath	None Title of office	er administering oath					

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 10						
	18 FILER NAME Leal, Janet L. (The Honorable) 19 Filer ID (I								
	0 SCHEDULE SUBTOTALS NAME OF SCHEDULE								
1.	\$								
2.	\$								
з. 🔲	3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)								
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 6,248.67						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$						
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$						
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS ITO FILER	RETURNED	\$						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment			Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages The Instruction Guide explains how to complete		se s/Contract Labor		Travel in Distri Travel Out of E OTHER (enter		above)		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 1/7 Rpt: 4/10		Leal, Jane	t L. (The Honorab	ole)					00058460		
4	Date	5	Payee name	<u> </u>								
ľ	08/03/2015	ľ	Brownsville									
_		1	Payee addr	ess; City;	State	Zip C	oho.					
6	Amount (\$)	ľ		n Buren St	Siale,	, 21p (Joue					
	\$250.00		1133 E Va	II Duleli St								
			Brownsville	e, TX 78520								
8	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	edule)	(b)	Description			,	
	OF EXPENDITURE		Contributio	ns/Donations Ma	de By						mplete Schedule T.	
	EXPENDITORE		Candidate	Officeholder/Polit	tical Comm	ittee				, officeholder livi		•
								newspaper	ın E	aucanon (r	IIE) Sponsorsh	пþ
_		L									-,	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	· · · · · · · · · · · · · · · · · · ·	Office so	ought			Office I	neld	
	Date		Payee name	9		·· · · · · · · · · · · · · · · · · · ·					·	
	10/28/2015		Brownsville	e LPGA								
	Amount (\$)		Payee addre	ess; City;	State;	Zip C	Code					
	\$100.00		•	Levee Road		•						
			Brownsville	e, TX 78521		4-4						
	PURPOSE	(a)		See Categories listed at th		edule)	(b)	Description				
	OF EXPENDITURE			ns/Donations Ma							mplete Schedule T.	
			Candidate	'Officeholder/Polit	icai Comm	ıittee		Golf Sponso		, officeholder livir in	ig experise	
								Con Oponso	11311	iP		
	Committee ONLY if dispost	<u> </u>	Candidata (Of	ficeholder name)ffino no	l wabt			Office I	vold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januluale/Oi	ficeholder name		Office so	Jugrit			Office i	leiu	
	Date		Payee name	9								
	08/18/2015		Brownsville	e Society for the F	revention	of Crue	elty to	Animals				
	Amount (\$)	Г	Payee addre	ess; City;	State;	Zip C	Code					
	\$500.00		PO Box 49	75								
	·											
			Brownsville	e, TX 78523								
	PURPOSE OF	(a)		See Categories listed at th		edule)	(b)	Description				
	EXPENDITURE			ns/Donations Ma		!**				ide of Texas. Co , officeholder livir	nplete Schedule T.	
			Candidate	Officeholder/Polit	icai Comm	ittee	İ	Gold Sponso			ig expense	
								Cold Opolisc	J1 J1	r		
	Complete ONLY if alice of	Ļ	Candidata/Of	finahaldar nama		office an	uaht			Office	old	
	Complete ONLY if direct expenditure to benefit C/O		Januldate/Of	ficeholder name	C	Office so	ugnt			Office h	ICIU	

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Loan Repayme Office Overhea Polling Expens Printing Expen Salaries/Wage	ent/Reimbursement d/Rental Expense e se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 2/7 Rpt: 5/10	2 FILER NAME Leal, Janet L. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00058460
4	Date 08/18/2015	5 Payee name Cameron County Bar Association			
6	Amount (\$) \$500.00	7 Payee address; City; State PO Box 3866 Brownsville, TX 78523	; Zip Code		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Contributions/Donations Made By Candidate/Officeholder/Political Comm	loudio,	Check if Austin, TX Sneakers For S	ide of Texas. Complete Schedule T. , officeholder living expense tudents Run/Walk and 5K
9	Complete ONLY if direct expenditure to benefit C/O		Office sought		Office held
	Date 12/14/2015 Amount (\$) \$100.00	Payee name Cameron County Juvenile Justice Dep Payee address; City; State 2310 W Hwy 77	ot. ; Zip Code		
	PURPOSE OF EXPENDITURE	San Benito, TX 78586 (a) Category (See Categories listed at the top of this schedule Contributions/Donations Made By Candidate/Officeholder/Political Comm		Check if Austin, TX	ide of Texas. Complete Schedule T. , officeholder living expense ys to benefit Boys & Girls Club of San
	Complete ONLY if direct expenditure to benefit C/O		Office sought		Office held
	Date 10/12/2015	Payee name Elite Promotions			
	Amount (\$) \$118.67	Payee address; City; State 50 East Elizabeth	; Zip Code		
		Brownsville, TX 78520			
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this sch Advertising Expense	nedule) (b)	L	ide of Texas. Complete Schedule T. , officeholder living expense terial (Lip Balm)
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Office sought		Office held

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
L								
1	Total pages Schedule F1:							
	Sch: 3/7 Rpt: 6/10	Leal, Janet L. (The Honorable) 00058460						
4	Date	5 Payee name						
	08/13/2015	Girl Scouts of Greater South Texas						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
ľ	\$2,000.00	202 East Madison						
	42,000,00							
		Hadisənən TV 70550						
		Harlingen, TX 78550						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By						
	Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Sponsorship - Award of Distinction Gala							
		Sponsorship - Award or Distinction Gala						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	experialiture to benefit C/Oi							
	Date	Payee name						
	12/07/2015	Girl Scouts of Greater South Texas						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$100.00	202 East Madison						
	Ψ100.00	202 Lust Mudison						
		Harlingen, TX 78550						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By						
	LAFENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense						
		Donation						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
	Date	Payee name						
	08/26/2015	Knights of Columbus #2785						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$100.00	1701 East Harrison Ave						
	φ100,000	1701 East Hamson Ave						
İ		Harlingen, TX 78550						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Candidate/Officeholder/Political Committee						
		Hole Sponsor - 3rd Annual K of C Memorial						
		Scholarship Golf Tournament						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	1						
 								

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	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: Sch: 4/7 Rpt: 7/10	2 FILER NAME Leal, Janet L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00058460								
	Date 12/16/2015	5 Payee name Little Cowboys Day Care								
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 5025 Paredes Line Road Brownsville, TX 78526								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation - Toys for Day Care Children								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date Payee name 08/06/2015 Rotary Club of Historic Brownsville Amount (\$) Payee address; City; State; Zip Code									
	\$180.00	4745 Lakeway Drive Brownsville, TX 78520								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Annual Rotary Dues								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
	Date 09/03/2015	Payee name Rotary Club of Historic Brownsville								
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 4745 Lakeway Drive								
		Brownsville, TX 78520								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ride for Rotary Sponsorship for 2015								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I 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: Sch: 5/7 Rpt: 8/10	2 FILER NAME Leal, Janet L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00058460								
4	Date 07/13/2015	5 Payee name San Benito Police Association								
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 601 N Oscar Williams Rd San Benito, TX 78586								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Benefit BBQ for SBPD Officer Arthur Palos								
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date 10/30/2015	Payee name Sounds of Downtown								
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 700 East Levee St Ste 211 Brownsville, TX 78520								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship - Dia De Los Muertos Celebration								
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date 08/21/2015	Payee name St. Joseph Academy Athletic Boosters								
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 101 St. Joseph Drive								
		Brownsville, TX 78520								
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertisement in Event Program								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gilt/Awards/Memorials Expens Legal Services The Instruction Guide ex	Salaries/\	Vage:	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed abo	ove)
-	Total pages Schedule F1:	I THE NAME		•			3	Filer ID	(Ethics Commission	on Eilers)
	Sch: 6/7 Rpt: 9/10	ł.	L. (The Honorable)				3	00058460	(Ethics Commission	on 1 licis)
4	Date	5 Payee name								
L	10/26/2015	·	Academy Athletic Bo							
6	Amount (\$)	7 Payee addre		State; Zip Co	ode					
	\$500.00	101 St. Jos	eph Drive							
		Brownsville	, TX 78520							
8	PURPOSE	(a) Category (Se	ee Categories listed at the top o	of this schedule)	(b)	Description				
	OF EXPENDITURE		s/Donations Made B			<u></u>			plete Schedule T.	
		Candidate/0	Officeholder/Political	Committee		_		officeholder living		
						Taste of the T	OW	m Sponsors	unh	
<u> </u>					<u> </u>					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offi H	ceholder name	Office sou	ight			Office he	eld	
	Date	Payee name								
	09/14/2015	Tip of Texas	s Family Outreach							
Г	Amount (\$)	Payee addre	ss; City;	State; Zip Co	de					
	\$500.00	455 East Le	vee Street							
		Brownsville	TX 78520							
┢	PURPOSE	(a) Category (Se	ee Categories listed at the top o	f this schedule)	(b)	Description				
	OF		s/Donations Made B			Check if travel or	utsio	ie of Texas. Com	plete Schedule T.	
	EXPENDITURE		Officeholder/Political					officeholder living		
						Spooktacular	Pia	ano Bar Spo	nsorship	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offi	ceholder name	Office sou	ght			Office he	eld	
	experientare to belieff or or	1								
	Date	Payee name	•							
	10/08/2015	Tip of Texas	Family Outreach							
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	de					
	\$100.00	455 East Le	vee Street							
		Brownsville,	TX 78520							
┢	PURPOSE	(a) Category (se	e Categories listed at the top o	f this schodulo)	(b)	Description				
	OF	· ·	s/Donations Made B		()		utsic	le of Texas. Com	plete Schedule T.	
	EXPENDITURE		Officeholder/Political (Check if Austin,	TX,	officeholder living	expense	
						Donation for T	ick	ets - Piano	Bar	
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OF	1								

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			Legal Services	Fees Office Overhead/Rental Expens Food/Beverage Expense Polling Expense Printing Expense			Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
_				expiains now to con	npiete inis ioini.	_	="	Cities Occaminates Filom	
1	Total pages Schedule F1: Sch: 7/7 Rpt: 10/10	E .	ME et L. (The Honorable)			3	Filer ID 00058460	(Ethics Commission Filers	s)
4	Date 10/20/2015	5 Payee nam Veteran's	^{ne} Memorial High Schoo	ol Choir					
6	Amount (\$) \$200.00		ress; City; . Military Hwy 281 lle, TX 78520	State; Zip Co	de				
8	PURPOSE OF EXPENDITURE	Contribution Candidate	(See Categories listed at the top ions/Donations Made E e/Officeholder/Political	By I Committee	Check if Austin	ı, TX,		g expense rogram Advertisemen	ıt
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Officeholder name	Office sou	ght		Office he	≱ld	