# JUAN V. GARCIA

**Amendment** 

SEMI-ANNUAL Report January 18, 2022 Amendment

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#### **CANDIDATE / OFFICEHOLDER** FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH instruction Guide explains how to complete this form. 19 MS / MRS / MR 3 CANDIDATE / Μŧ OFFICE USE ONLY **OFFICEHOLDER** MR V Juan NAME Date **REPRICE**MENT OF ELECTIONS & NICKNAME LAST SUFFIX VOTER REGISTRATION J.V. Garcia 4 CANDIDATE/ ADDRESS / PO BOX; APT / SUITE #; STATE; ZIP CODE JAN 3 I 2022 **OFFICEHOLDER** 5718 Wild Persimmon, Harlingen, TX 78552 MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Posts **OFFICEHOLDER** (956 970-1159 PHONE Receipt # Amount \$ MS / MRS / MR FIRST 6 CAMPAIGN М TREASURER Juan Mr Date Processed NAME NICKNAME LAST SUFFIX Date imaged J.V. Garcia STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; CAMPAIGN STATE: ZIP CODE **TREASURER** 5718 Wild Persimmon, Harlingen, TX 78552 **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER CAMPAIGN EXTENSION TREASURER PHONE 970-1159 ( 956 9 REPORT TYPE 30th day before election Runoff 15th day after campaign January 15 treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Year Day Year COVERED 9 21 ′ 31 / 21 THROUGH **ELECTION TYPE ELECTION DATE** 11 ELECTION Primary Runoff Other Description 3 22 General Special OFFICE HELD (If any) 12 OFFICE 13 OFFICE SOUGHT (If known) Cameron County Commissioner Pct. #4 14 NOTICE FROM 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. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME Juan Virgilio Garcia		1	<b>16</b> Filer	· ID (E	Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$	50.00
	2,	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	20,183.72
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	1,116.22
	4,	TOTAL POLITICAL EXPENDITURES		\$	20,957.39
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	ΓDAY	\$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE	\$	0.00

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.

Signature of Candidate or Officeholder

### Please complete either option below:

Sworn to and 20 22	MONICA DE LEON My Notary ID # 125050763 Expires January 23, 2026  is subscribed before me by	Dele	eon		Admini	Anuany. Strator radministering oath
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	garage work to the second	ĐŖ.				
(2) Unswor	n Declaration					
My name is _		, and n	ny date of birti	n is		
My address is		,	· 		1	
	(street)		(city)	(state)	(zip code)	(country)
Executed in _	County, State of	, on the	day of(me	onth)	, 20 (year)	
		S	ignature of Ca	ndidate/Offi	ceholder (Dec	larant)

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

19 FILER Juan Vi	<sub>NAME</sub> rgilio Garcia	20 Filer ID (Ethics Comr	nissk	on Filers)
	DULE SUBTOTALS OF SCHEDULE		;	SUBTOTAL AMOUNT
1. ■	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	15,200.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	4,983.72
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. ■	SCHEDULE E: LOANS	-	\$	8,128.68
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	20,957.39
6,	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$	2.401
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	TIONS RETURNED	\$	

## SCHEDULE A1

if the requested information is not applicable, DO NOT include this page in the report.					
The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 3		
2 FILER NAME Juan Virgili	o Garcia		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)		
12/16/2021	6 Contributor address; City; 11213 N. FM 88, Weslaco,	State; Zip Code TX 78596	1,500.00		
· ·	pation / Job title (See Instructions) ractor and Registered Nurse (Ret.)	l_	ions)		
Date ·	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)		
12/22/2021	Contributor address; City;	State; Zip Code	2,500.00		
	480-B N. Sam Houston Blvd, San B	enito, TX /8586			
	ation / Job title (See Instructions) ractor/Graduate Engineer	. Employer (See Instructi	ons)		
Date	Full name of contributor out-of-state PAC (I	(ID#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occup	oation / Job title (See Instructions)	Employer (See Instructi	lons)		
Date	Full name of contributor out-of-state PAC (	;iD#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)					
<del></del>	ATTACH ADDITIONAL COPIES OF				

## SCHEDULE A1

ii tiilo ieques	ned information is not applicable, <b>DO NOT life</b>	Jude tills page ill tile i	ероп.
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME Juan Virgili	o Garcia		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC David V. Day	(ID#:)	7 Amount of contribution (\$)
11/08/2021	6 Contributor address; City; 901 S. Stuart Place Road, Harlin	state: Zip Code igen, TX 78552	2,000.00
8 Principal occu Professional E	1	9 Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC Andres Palma	(ID#:)	Amount of contribution (\$)
11/17/2021	Contributor address; City; 1801 Battista St., Edinburg	State; Zip Code g, TX 78542	5,000.00
Principal occup Professional E	ation / Job title (See Instructions)  Ingineer	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	(10#)	Amount of contribution (\$)
11/18/2021	Contributor address: City; 1925 Whitetail Dr., Harlinge	State; Zip Code	1,500.00
Principal occup Professional E	ation / Job title (See Instructions) Ingineer	Employer (See Instruct	ions)
Date	Full name of contributor out-ot-state PAC	(ID#:)	Amount of contribution (\$)
12/03/2021	Contributor address; City;	State; Zip Code	1,500.00
	1501 Mackenzie Dr., Wesla	co, TX 78599	·
Principal occup General Conti	ation / Job title (See Instructions) actor	Employer (See Instruct	ions)
		, , , , , , , , , , , , , , , , , , , ,	
	ATTACH ADDITIONAL COPIES Of the contributor is out-of-state PAC, please see Instru		

# SCHEDULE A1

If the reques	ed information is not applicable, DO NOT include the	is page in the r	eport.
The	instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Juan Virgilio	o Garcia		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of contribution (\$)
12/10/2021	6 Contributor address; City; State; 24215 Preston Trail, Harlingen, T	Zip Code X 78552	300.00
	pation / Job title (See Instructions)  an and Community Advocate for Drainage	loyer (See Instruction	ons)
··· Date	Full name of contributor out-of-state PAC (ID#	·)	Amount of contribution (\$)
12/13/2021	Ruben Torres, Jr.  Contributor address; City; State; 17196 Firestone Dr., Harlingen, T	1	100.00
Principal occup CBP Border P	ation / Job title (See Instructions) Empl	loyer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
12/14/2021	Robert Closner  Contributor address; City; State; P.O. Box 373, Mercedes, TX	Zip Code <b>78570</b>	500.00
Principal occup Professional E	1 .	loyer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
12/19/2021	· · · · · · · · · · · · · · · · · · ·	Zip Code	250.00
· · · · · ·	518 Chapote Ave., Harlingen, T  pation / Job title (See Instructions)  y Veteran, Registered Nurse	X /8552	ions)
	ATTACH ADDITIONAL COPIES OF THIS If contributor is out-of-state PAC, please see Instruction gu		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

Th	ne Instruction Guide explains how to complete this form	1.	1 Total pages Schedule A2:		
<sup>2</sup> FILER NAME Juan Virgilio Garcia		3 Filer ID (Ethics Commission Filers)			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$		
5 Date 09/29/2021	6 Full name of contributor □ out-of-state PAC (ID#: Chuy's Custom Sports 7 Contributor address; City; State; 19757 W. US Highway 77, San Benito, T	Zlp Code X 78586	8 Amount of   9 In-kind contribution Contribution \$   description   4,983.72   Check if travel outside of Texas. Complete Schedule T.		
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	itor'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	Zip Code	Amount of In-kind contribution Contribution \$   description		
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor'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 T f contributor is out-of-state PAC, please see instruction				

# LOANS

# SCHEDULE E

If the requested	information is not applicable, DO NO	I include this page in the rep	oort.
The	Instruction Gulde explains how to comple	ete this form.	1 Total pages Schedule E:
2 FILER: NAME			3 Filer ID (Ethics Commission Filers)
Juan Virgilio	Garcia		
4 TOTAL OF UN	ITEMIZED LOANS		\$
5 Date of loan	7 Name of lender out-of-state F	PAC (ID#:)	9 Loan Amount (\$)
09/07/2021	Juan V. Garcia		318.25
6 is lender	8 Lender address; City;	State; Zip Code	10 Interest rate
a financial Institution?	5718 Wild Persimmon, Harlinge	en, TX 78552	11 Maturity date
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)	
Professional E	ngineer		
14 Description of Coll  ■ none	ateral .	Check if personal fundaccount (See Instruct	ds were deposited into political dons)
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
,	18 Guarantor address; City;	State; Zip Code	
<ul> <li>not applicable</li> </ul>	,	· · · · · · · · · · · · · · · · · · ·	
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
, Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)
10/01/2021	Juan V. Garcia		411.35
is lender	Lender address; City;	State; Zip Code	Interest rate
a financial Institution?	5718 Wild Persimmon, Harling	en, TX 78552	Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	1
Professional I	Engineer		
Description of Coll  none	ateral	Check if personal fun account (See Instruc	ids were deposited into political tions)
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
. • not applicable			
1	on (See Instructions)	Employer (See Instructions)	•
Professional Eng	gineer	<u> </u>	
If Id	ATTACH ADDITIONAL COP	PIES OF THIS SCHEDULE AS NE struction guide for additional re	

# LOANS SCHEDULE E

If the requested	If the requested information is not applicable, DO NOT include this page in the report.				
The	The Instruction Guide explains how to complete this form.				
<sup>2</sup> FILER NAME Juan Virgilio	Garcia	·	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UN	NITEMIZED LOANS		\$		
5 Date of loan 10/01/2021	Juan V. Garcia	PAC (ID#)	9 Loan Amount (\$) 400.00		
6 is lender a financial Institution?  Y N	8 Lender address; city; 5718 Wild Persimmon, Harling	State; Zip Code	10 Interest rate  11 Maturity date		
12 Principal occupation Engineer	on / Job title (See Instructions)	13 Employer (See Instructions)			
14 Description of Colf	ateral .	Check If personal fun- account (See Instruct	ds were deposited into political. Ilons)		
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)		
■ not applicable	18 Guarantor address; City;	State; Zip Code			
20 Principal Occupat	tion (See Instructions)	21 Employer (See Instructions)			
Date of loan 10/07/2021	Name of lender ☐ out-of-state  Juan V. Garcia	PAC (ID#:)	Loan Amount (\$) 400.00		
Is lender a financial Institution?	Lender address; City; 5718 Wild Persimmon, Harling	State; Zlp Code	Interest rate		
DYBN		· · · · · · · · · · · · · · · · · · ·	Maturity date		
Engineer	on / Job title (See Instructions)	Employer (See Instructions)			
Description of Colle	ateral	Check if personal fun account (See Instruc	ds were deposited into political tions)		
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)		
	Guarantor address; City;	State; Zip Code			
Principal Occupation (See Instructions)  Employer (See Instructions)					
}f le	ATTACH ADDITIONAL COP	NES OF THIS SCHEDULE AS NE struction guide for additional re			

# LOANS

## SCHEDULE E

If the requested	information is not applicable, DO NO	T include this page in the rep	port.
The	Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule E:
2 FILER NAME		•	3 Filer ID (Ethics Commission Filers)
Juan Virgilio	Garcia		
4 TOTAL OF UN	IITEMIZED LOANS		\$
5 Date of loan	7 Name of lender out-of-state i	PAC (ID#:)	9 Loan Amount (\$)
10/19/2021	Juan V. Garcia		200.00
6 Is lender a financial Institution?	8 Lender address; City; 5718 Wild Persimmon, Harlinge	State; Zip Code	10 Interest rate
□ y ■ N			11 Maturity date
12 Principal occupation	on / Job title (See instructions)	13 Employer (See Instructions)	
Engineer			,
14 Description of Colle	ateral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City;	State; Zip Code	•
■ not applicable	·		
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender out-of-state	PAC (ID#:)	Loan Amount (\$)
11/12/2021	Juan V. Garcia		2,343.75
ls lender a financial	Lender address; City;	State; Zip Code	Interest rate
Institution?	5718 Wild Persimmon, Harling	en, IX 78552	Maturity date
Principal occupation	on / Job title (Sea Instructions)	Employer (See Instructions)	
Description of Colli	ateral	Check if parencel fun	ds were deposited into political
none •		account (See Instruc	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicable			
Principal Occupati	on (See Instructions)	Employer (See Instructions)	
		IES OF THIS SCHEDULE AS NE	ENEN
If le	ender is out-of-state PAC, please see in		

#### **LOANS** SCHEDULE E

If the requested	l information is not applicable, DO NO	T include this page in the rep	oort.	
The	Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule E:	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Juan Virgilio	Garcia			
4 TOTAL OF UN	IITEMIZED LOANS		\$	
5 Date of loan	7 Name of lender out-of-state i	PAC (ID#:)	9 Loan Amount (\$)	
11/19/2021	Juan V. Garcia		2,676.25	
6 Is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate	
I Y I N	5718 Wild Persimmon, Harlinge	en, TX_78552	11 Maturity date	
	on / Job title (See Instructions)	13 Employer (See Instructions)		
Professional E				
14 Description of Coll  none	ateral	Check if personal function of the Check if personal functions of the Check is a constant of the Check if personal functions of the Check is a constant of the Check is a consta	ds were deposited into political ions)	
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)	
·	18 Guarantor address; City;	State; Zip Code		
≖ not applicable				
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)		
Date of loan	Name of lender out-of-state i	PAC (ID#:)	Loan Amount (\$)	
11/23/2021	Juan V. Garcia	·	1,250.00	
ls lender a financial	Lender address; City;	State; Zip Code	Interest rate	
Institution?	5718 Wild Persimmon, Harlinge	en, IX 78552	Maturity date	
	on / Job title (See Instructions)	Employer (See Instructions)	The second secon	
Engineer				
Description of Colle	ateral		ls were deposited into political	
none none		account (See Instructi	ons)	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)	
	Guarantor address; City;	State; Zip Code		
not applicable		·		
Principal Occupation	Principal Occupation (See Instructions)  Employer (See Instructions)			
		L		
If le	ATTACH ADDITIONAL COPI nder is out-of-state PAC, please see ins	ES OF THIS SCHEDULE AS NEE		

#### LOANS SCHEDULE E

If the requested	information is not applicable, DO NO	T include this page in the rep	port.
The	Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule E:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Juan Virgilio	Garcia		
4 TOTAL OF UN	IITEMIZED LOANS		\$
5 Date of loan	7 Name of lender out-of-state F	PAC (ID#:)	9 Loan Amount (\$)
12/04/2021	Juan V. Garcia		129.08
6 Is lender a financial Institution?	8 Lender address; City; 5718 Wild Persimmon, Harlinge	State; Zip Code en, TX 78552	10 Interest rate  11 Maturity date
OYDN			Tt Maturity date
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)	
Professional E	ngineer		
14 Description of Colle	ateral	Check if personal fund account (See Instruct	ds were deposited into political ions)
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City;	State; Zip Code	
■ not applicable			
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender ☐ out-of-state I	PAC (ID#:)	Loan Amount (\$)
Is lender a financial	Lender address; City;	State; Zip Code	Interest rate
Institution?			Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Description of Colla	ateral	Chack if personal fun	ds were deposited into political
none		account (See Instruct	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
■ not applicable	·		
Principal Occupation	on (See Instructions)	Employer (See Instructions)	
If le	ATTACH ADDITIONAL COP	PIES OF THIS SCHEDULE AS NEE struction guide for additional re	

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **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 Glft/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) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Juan Virgilio Garcia 4 Date 5 Payee name 09/07/2021 La Feria Cafe 6 Amount (\$) 7 Payee address: State: Zip Code 318.25 121 W. Commercial Ave., La Feria, TX 78559 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Food/Beverage Expense **Drainage District Informational Meeting** EXPENDITURE (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 10/01/2021 Liz Gonzalez Designs Amount (\$) Payee address: City; State: Zip Code 411.35 P.O. 6586, McAllen, TX 78502 Category (See Categories listed at the top of this schedule) Description PURPOSE Contract Labor Push card design EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Payee name 10/01/2021 Jose Raymond Garcia Amount (\$) Payee address; Cíty; State: Zìp Code 214 E. Hurst, Harlingen, TX 78550 400.00 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Wages, salaries, contract labor contract labor for campaign OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Mernorials Expense Lenat Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Manas/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

Legal Services Candidate/Officeholder/Political Committee 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: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Juan Virgilio Garcia 4 Date 5 Payee name Sanjuanita Mares 10/07/2021 6 Amount (\$) 7 Payee address; City; State: Zip Code 400.00 10529 W. Clark Rd., La Feria, TX 78559 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Wages, salaries, contract labor contract labor for campaign OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 10/19/2021 Jose Raymond Garcia Amount (\$) Payee address; City; State: Zip Code 200.00 214 E. Hurst, Harlingen, TX 78550 Category (See Categories listed at the top of this schedule) Description PURPOSE Wages, salaries, contract labor contract labor for campaign OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name 11/08/2021 Juan Virgilio Garcia Amount (\$) Payee address; Zip Code 5718 Wild Persimmon, Harlingen, TX 78552 318.25 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Food/Beverage for informational Loan Reimbursement drainage meeting EXPENDITURE Check if travel outside of Texas, Complete Schedula T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidats/Office-holder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memodals Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/W	panse /ages/Contract Labor	Other (enter a category not listed above)				
Cledic Cald Payment	The instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME Juan Virgilio Garcia		3 Filer ID (Ethics Commission Filers)				
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·					
11/08/2021	Juan Virgilio Garcia						
6 Amount (\$)	7 Payee address;	City;	State; Zip Code				
411.35	5718 Wild Persimmon, Harlingen, TX	78552					
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
PURPOSE OF EXPENDITURE	Loan Reimbursement	Push card des	igns				
	(c) Check if travel outside of Taxas, Complete Schedule T.	Check if Austh	n, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held				
Date ·	Payee name						
11/12/2021	ACME Partnership, LP						
Amount (\$)	Payee address;	City;	State; Zip Code				
2,343.75	3701 Bee Cave Rd., Austin, TX 7874	16					
	Category (See Categories listed at the top of this schedule)	Description					
PURPOSE OF EXPENDITURE	Advertising Expense	Electronic Billt	ooards (x2)				
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin	n, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OI-	Candidate / Officeholder name	Office sought	Office held				
Date	Payee name						
11/19/2021	ACME Partnership, LP						
Amount (\$)	Payee address;	City;	State; Zip Code				
2,676.25	3701 Bee Cave Rd., Austin, TX 7874	6					
	Category (See Categories listed at the top of this schedule)	Description					
PURPOSE OF EXPENDITURE	Advertising Expense	Electronic Billb	oards (x2)				
	Check if travel outside of Texas, Complete Schedule T.	Check if Austir	n, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held				
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED				

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **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 Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Poling 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: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Juan Virgilio Garcia 4 Date 5 Payee name 11/27/2021 Juan Virgilio Garcia 7 Payee address; 6 Amount (\$) City: Zip Code 2,343.75 5718 Wild Persimmon, Harlingen, TX 78552 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Loan Reimbursement Advertising on electronic billboards EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date Juan Virgilio Garcia 11/27/2021 Amount (\$) City; Payee address; State: Zip Code 2,676.25 5718 Wild Persimmon, Harlingen, TX 78552 Category (See Categories listed at the top of this schedule) Description PURPOSE Loan Reimbursement Advertising on electronic billboards OF **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 11/27/2021 Juan Virgilio Garcia Amount (\$) Payee address; City; State: Zip Code 5718 Wild Persimmon, Harlingen, TX 78552 400.00 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Loan Reimbursement wages/food expense for Jose Garcia OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **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 Glft/Awards/Mernorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wares/Contract Labor Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Other (entry a paterony not listed above)

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:	1	AME ilio Garcia	-		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee na					
11/27/2021	Juan Vir	gilio Garcia				
6 Amount (\$)	7 Payee ad	dress;		City;	State;	Zip Code
400.00	5718 Wi	ld Persimmor	n, Harlingen, T>	78552		
8	(a) Categor	y (See Categories listed	at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Loan R	eimbursemen	t .	wages/food ex	kpense for Sar	Juanita Mares
	(c)	Check if travel outside of Te	ixas, Complete Schedule T.	Check if Aust	tin, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF		ate / Officeholder n	ame	Office sought		Office held
Date	Payee na	me .				
11/27/2021	Juan Vir	gilio Garcia				
Amount (\$)	Payee ad	dress;		Clty;	State;	Zip Code
200.00	5718 Wi	ld Persimmor	n, Harlingen, T	78552	•	
	Category	(See Categories listed a	the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Loan R	eimbursemer	nt .	wages/food e	xpense for Jo	se Garcia
		Check if travel outside of Te	xaa, Complete Schedule T.	Check if Aust	lin, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder na	ame	Office sought		Office held
Date	Payee na	ime	, , ,			
12/13/2021	Chuy's (	Custom Sport	s			
Amount (\$)	Payee ad	dress;		City;	State;	Zip Code
1,799.11	1975 W.	US Highway	77, San Benito	, TX 78586	·	
	Category	(See Categories listed a	the top of this schedule)	Description	A de Andréa de Companyo de Com	
PURPOSE OF EXPENDITURE	Advertis	ing and Printi	ng Expense	Signs, shirts,	oush cards.	
		Check if travel outside of Te	xas, Complete Schedule T.	Check If Aust	tin, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder r	ame	Office sought		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **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)

Credit Oal trayment	The Instruction Guide explains how to d	omplete this form,		•
1 Total pages Schedule F1:	2 FILER NAME Juan Virgilio Garcia		3 Filer ID (Ethic	s Commission Filers)
4 Date	5 Payee name			
12/14/2021	Benchmark Outdoor Media, LLC			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
600.00	2120 N. Crockett St., Sherman, TX	75092		,
8 .	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Electronic Billi	ooard	
	(c) Check if travel outside of Taxasi, Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
12/21/2021	ACME Partnership, LP			
Amount (\$)	Payee address;	City;	State;	Zip Code
2,480.00	3701 Bee Cave Rd., Austin, TX 787	46		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Electronic Bill	boards (x2)	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder livin	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
12/23/2021	Benchmark Outdoor Media, LLC			
Amount (\$)	Payee address;	City;	State;	Zìp Code
1,200.00	2120 N. Crockett St., Sherman, TX	75092		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Electronic Billi	ooards (x2)	
	Check if travel outside of Texas, Complete Schedule T.	Check if Aust	lin, TX, officeholder livin	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **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/Memortals Expense Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel In District
- Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/N  The Instruction Guide explains how to c	/ages/Contract Labor omplete this form.	Other (enter a categor	y not listed above)
1 Total pages Schedule F1:	2 FILER NAME Juan Virgilio Garcia		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
11/23/2021	Cameron County Democratic Party			
6 Amount (\$)	7 Payee address;	Cl <del>t</del> y;	State;	Zip Code
1,250.00	1411 N. Stuart Place Rd., Harlingen,	TX 78552		-
·8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		**************************************
PURPOSE OF EXPENDITURE	Filing Fee	CC Democrati	c Candidate F	iling Fee
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	•	Office held
Date	Payee name			
12/04/2021	El Gallito Mexican Restaurant			
Amount (\$)	Payee address;.	City;	State;	Zip Code
129.08	2480 W. Business 77, Ste. 1, San Be	nito, TX 78586	·	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Tacos for Domi	inick's Day Ever	nt in Primera, TX
	Check if travel outside of Texas, Complete Schedule T.	. Check if Austir	n, TX, officeholder (lying	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	C	Office held
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zìp Code
PURPOSE	Category (See Categories listed at the top of this schedule)	Description		
OF EXPENDITURE				
<b>"</b>	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	•,	Office held
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEE	DED	

			·	
	,			

#### **CANDIDATE / OFFICEHOLDER** FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form, 3 CANDIDATE / MS / MRS / MR М OFFICE USE ONLY **OFFICEHOLDER** MR: Juan NAME Date Received NICKNAME LAST SUFFIX J.V. Garcia ADDRESS / PO BOX; 4 CANDIDATE / APT / SUITE #: STATE: ZIP CODE **OFFICEHOLDER** 5718 Wild Persimmon, Harlingen, TX 78552 MAILING **ADDRESS** Change of Address CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (956 970-1159 PHONE Receipt # Amount \$ MS / MRS / MR FIRST CAMPAIGN М **TREASURER** Juan Mr Date Processed NAME NICKNAME LAST SUFFIX Date Imaged J.V. Garcia STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; **CAMPAIGN** CITY: STATE; ZIP CODE **TREASURER** 5718 Wild Persimmon, Harlingen, TX 78552 ADDRESS (Residence or Business) AREA CODE CAMPAIGN PHONE NUMBER EXTENSION **TREASURER** PHONE 956 970-1159 9 REPORT TYPE 30th day before election 15th day after campaign January 15 Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Dav COVERED THROUGH 11 ELECTION **ELECTION DATE** ELECTION TYPE Primary Runoff Other Month Description 22 General Special OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (If known) Cameron County Commissioner Pct. #4 14 NOTICE FROM 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. CANDIDATE'S AND OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS **GENERAL** Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 2

15 C/OH NAME		<b>16</b> Fil	er ID (Ethics Commission Filers)
Juan Virgilio Garcia			
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRI PLEDGES, LOANS, OR GUARANTEES O CONTRIBUTIONS MADE ELECTRONICAL	F LOANS, OR	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GE		\$ 3,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPEND	NTURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 4,172.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAI OF REPORTING PERIOD	NTAINED AS OF THE LAST DAY	\$ 0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUT LAST DAY OF THE REPORTING PERIOD		\$ 0.00
18 SIGNATURE I S	wear, or affirm, under penalty of perjury, that the ac	companying report is true and	correct and includes all information
1	quired to be reported by me under Title 15, Election Co		
		Jun V. Da	
		Signature of Candidat	e or Officeholder
	Disease secondada ald	New aution balous	
	Please complete ei	iner opnon below.	
(1) Affidavit			
(I) Allidavit	MONICA DE LEON	•	
	My Notary ID # 125050763		
NOTARY S AMPRIL	Expires January 23, 2026		at
Sworn to and subscribed	before me by Juan V. Gura	10 this the 31	day of January
	which, witness my hand and seal of office.	,	
Moneca 1	Ukeon Monica Do	cheon An	MINISTRATOR Title of officer administering oath
Signature of officer administr	ering oath Printed name of officer admini	-	Title of officer administering can
And the second section of the second			• •,
(2) Unsworn Declarat	OH .		
My name is		_, and my date of birth is	
			,
•	(street)	(city) (state)	(zíp code) (country)
Executed in	County, State of, on the	e day of	20
		(month)	(year)
	· -	Signature of Candidate/O	fficeholder (Declarant)

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

	FILER NAME Jan Virgilio Garcia	20 Filer ID (Ethics Commission	Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		JBTOTAL MOUNT	
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
з.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			
4.	4. SCHEDULE E: LOANS			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS \$	4,172.29	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS \$		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	78441	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	IDS \$		
10,	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH \$		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS \$		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED \$		

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

	, = = =================================	
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Juan Virgilio	o Garcia	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Israel and Rosie Coronado	7 Amount of contribution (\$)
01/05/2022	6 Contributor address; City; State; Zip Code 1016 S. Mile 2 1/2, Weslaco, TX 78596	500.00
•	pation / Job title (See Instructions)  9	tions)
Date	Full name of contributor out-of-state PAG (ID#)	Amount of contribution (\$)
01/07/2022	Christopher and Stephanie Hamby  Contributor address; City; State; Zip Code  5410 Hurd Ct., Harlingen, TX 78552	500.00
	eation / Job title (See Instructions)  Employer (See Instructions)  Cactor/Graduate Engineer	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
01/14/2022	Fernando Gallegos  Contributor address; City; State; Zip Code  1615 Laurel Ct., Donna, TX 78537	2,000.00
Principal occup Professional E	pation / Job title (See Instructions)  Employer (See Instructions)  Engineer	l utions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
01/08/2022	Robin and Judith DeHart  Contributor address; City; State; Zip Code  16593 W. Barger Ct., Harlingen, TX 78552	250.00
•	ractor and Registered Nurse (Ret.)  Employer (See Instructions)	otions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS	NEEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# LOANS SCHEDULE E

If the requeste	d information is not applicable, DO NC	T include this page in the re	port.
The	Instruction Guide explains how to comp	lete this form.	1 Total pages Schedule E:
<sup>2</sup> FILER NAME Juan Virgilio	Garcia		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF U	NITEMIZED LOANS		\$
5 Date of loan 01/14/2022	7 Name of lender □ out-of-state PAC (ID#:)  Juan V. Garcia		9 Loan Amount (\$) 750.00
6 Is lender a financial Institution? ☐ Y ■ N	8 Lender address; City; 5718 Wild Persimmon, Harling	State; Zip Code	10 Interest rate  11 Maturity date
12 Principal occupati Professional E	on / Job title (See Instructions) Ingineer	13 Employer (See Instructions)	1
14 Description of Col	ateral	Check if personal fun- account (See Instruct	ds were deposited into political
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
■ not applicable	18 Guarantor address; City;	State; Zip Code	
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)
Is lender a financial Institution?	Lender address; City;	State; Zip Code	Interest rate
□ y ■ N	THE REPORT OF THE PROPERTY OF		Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Description of Colle	ateral	Check if personal fund account (See Instruct	ds were deposited into political lons)
GUARANTOR INFORMATION	Name of guarantor	C.	Amount Guaranteed (\$)
■ not applicable	Guarantor address; City;	State; Zip Code	
Principal Occupation	on (See Instructions)	Employer (See Instructions)	
. If le	ATTACH ADDITIONAL COPI	ES OF THIS SCHEDULE AS NEE truction guide for additional re	

Forms provided by Texas Ethics Commission

#### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Travel Out Of District

Transportation Equipment & Related Expense Travel in District

Solicitation/Fundraising Expense

Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule F1: Juan Virgilio Garcia 5 Payee name 4 Date 01/14/2022 Real Strategic Solutions City; Zip Code State: 6 Amount (\$) 7 Payee address; P.O. Box 1526, Olmito, TX 78575 750.00 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE Consult on strategy and voter data. Consulting Expense OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense (c) Office sought Office held Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date City: State; Zip Code Amount (\$) Payee address; Description Category (See Categories listed at the top of this schedule) **PURPOSE** OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Zìp Code Amount (\$) Payee address; City; State: Description Category (See Categories listed at the top of this schedule) PURPOSE OF **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **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 Glft/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Other (enter a category not listed shows)

Cardidate/Officerfolder/Politica Credit Card Payment	al Committee Legal Services Salaries/V  The Instruction Guide explains how to a	Vages/Contract Labor	Other (enter a catego	ory not listed above)
1 Total pages Schedule F1:	2 FILER NAME Juan Virgilio Garcia		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name		<u> </u>	
01/14/2022	Chuy's Custom Sports			
6 Amount (\$)	7 Payee address;	City;	State:	Zlp Code
2,500.00	1975 W. US Highway 77, San Benito	•	,	<b></b>
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising and Printing Expense	Signs, Shirts, I	Push cards, e	etc.
, , , , , , , , , , , , , , , , , , ,	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name I	Office sought	,	Office held
Date	Payee name			
01/08/2022	El Rancho Restaurant		-	
Amount (\$)	Payee address;	City;	State;	Zip Code
172.29	206 N. 77 Sunshine Strip, Harlingen,	TX 78552	,	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food and Beverage Expense	Tacos and Coffee fo Tournament	or Harlingen Baseb	all Boosters Golf
	Check If travel outside of Taxas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	· · · Gandidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/18/2022	Juan Virgilio Garcia			
Amount (\$)	Payee address;	City;	State;	Zip Code
750.00	5718 Wild Persimmon, Harlingen, TX	78552		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Loan Reimbursement	Consulting Exp	ense-Strateg	ic Solutions
	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
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEE	DED	

		•