JUAN V. GARCIA

SEMI-ANNUAL REPORT JANUARY 18, 2022

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. 22 MS / MRS / MR FIRST 3 CANDIDATE / Mí OFFICE USE ONLY **OFFICEHOLDER** MR Juan ٧ NAME Date Registration NICKNAME LAST SUFFIX J.V. Garcia JAN 18 2022 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **OFFICEHOLDER** 5718 Wild Persimmon, Harlingen, TX 78552 218 MAILING RECEIVED **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (956)970-1159 PHONE Receipt # Amount \$ MS / MRS / MR FIRST MI 6 CAMPAIGN TREASURER Juan Mr Date Processed NAME NICKNAME LAST SUFFIX Date Imaged J.V. Garcia STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; 7 CAMPAIGN STATE: ZIP CODE **TREASURER** 5718 Wild Persimmon, Harlingen, TX 78552 **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER **EXTENSION** 8 CAMPAIGN TREASURER PHONE 970-1159 (956 9 REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (Officeholder Only) Exceeded Modified July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Month Day Year Year COVERED 18 22 9 21 THROUGH **ELECTION DATE ELECTION TYPE** 11 ELECTION Other Description Primary Runoff Month Day Year General Special 22 3 OFFICE HELD (if anv) 13 OFFICE SOUGHT (if known) 12 OFFICE Cameron County Commissioner Pct. #4 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 14 NOTICE FROM POLITICAL. CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 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

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15 C/OH NAME Juan Virgilio Garcia		16 Filer ID	(Ethics Commission Filers)
17 CONTRIBUTION TOTALS	<ol> <li>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</li> </ol>	\$	50.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	23,383.72
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	1,116.22
	4. TOTAL POLITICAL EXPENDITURES	\$	26,508.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$	0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	FTHE \$	0.00
18 SIGNATURE I S	wear, or affirm, under penalty of perjury, that the accompanying report is true	e and correct	and includes all information
rec	juired to be reported by me under Title 15, Election Code	A	
	( / V	<b>A</b> .	<b></b>
·	Simplify of Co		
	Signature of Ca	indicate of O	micenoliser
	Please complete either option below	<b>√</b> :	
(1) Affidavit			
(-)	MONICA DE LEON		
	My Notary ID # 125050763		
NOTARY STAMP/SEA	Expires January 23, 2026	.c.th	· personne
Sworn to and subscribed	before me by JUAN V. GARCIA this the	da	ay of <u>January</u> ,
20 dd tacertify	which, witness my hand and seal of office.	Λ	ay of January,
Monica W	their Monica Deleon		Counting Admir
Signature of officer administe	ring oath Printed name of officer administering oath	Title	e of officer administering oath
Who are the first to be	OR 1		
(2) Unsworn Declaration	on		
	, and my date of birth is		•
My address is	(Alexand)		
Eventual in	. ,	state) (zip	, , , , , , , , , , , , , , , , , , , ,
Executed in	County, State of, on theday of(month	, 2 1)	(year)
	Signature of Candid	date/Officehole	der (Declarant)

# **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

19 Մ	FILER NAME Jan Virgilio Garcia	20 Filer ID (Ethics Comm	nissi	on Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	:	\$	18,400.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	:	\$	4,983.72
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	8,878.68
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS S	\$	26,508.76
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	:	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUI	NDS S	\$	
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 reques	sted 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 Virgili	o Garcia	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) David V. Day	7 Amount of contribution (\$)
11/08/2021	6 Contributor address; City; State; Zip Code 901 S. Stuart Place Road, Harlingen, TX 78552	2,000.00
8 Principal occu Professional E	pation / Job title (See Instructions)  9 Employer (See Instructions)  Ingineer	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)  Andres Palma	Amount of contribution (\$)
11/17/2021	Contributor address; City; State; Zip Code 1801 Battista St., Edinburg, TX 78542	5,000.00
Principal occup Professional E	ation / Job title (See Instructions) Engineer Engineer	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
11/18/2021	Marcus D. Cruz  Contributor address; City; State; Zip Code  1925 Whitetail Dr., Harlingen,TX 78550	1,500.00
Principal occup Professional E	ation / Job title (See Instructions) Employer (See Instructions)	otions)
Date	Full name of contributor out-of-state PAC (ID#:)  Nereyda Saenz	Amount of contribution (\$)
12/03/2021	Contributor address; City; State; Zip Code	1,500.00
	1501 Mackenzie Dr., Weslaco, TX 78599	
Principal occup General Contr	ation / Job title (See Instructions) Employer (See Instructions)	tions)
	ATTACH ADDITIONAL CODIES OF THIS SCHEDULE AS I	JEEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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 Virgili	o Garcia	3 Filer ID (Ethics Commission Filers)			
4 Date	Full name of contributor out-of-state PAC (ID#:)  Robert W. Richardson	7 Amount of contribution (\$)			
12/10/2021	6 Contributor address; City; State; Zip Code 24215 Preston Trail, Harlingen, TX 78552	300.00			
•	pation / Job title (See Instructions)  an and Community Advocate for Drainage	tions)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)			
12/13/2021	Ruben Torres, Jr.  Contributor address; City; State; Zip Code  17196 Firestone Dr., Harlingen, TX 78552	100.00			
Principal occup CBP Border P	ation / Job title (See Instructions)  Employer (See Instruct atrol (ret.)	ions)			
Date	Full name of contributor out-of-state PAC (ID#:)  Robert Closner	Amount of contribution (\$)			
12/14/2021	Contributor address; City; State; Zip Code P.O. Box 373, Mercedes, TX 78570	500.00			
Principal occup Professional E	ation / Job title (See Instructions) Employer (See Instructionglineer	ions)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)			
12/19/2021	Rene and Jaclyn Perez  Contributor address; City; State; Zip Code  518 Chapote Ave., Harlingen, TX 78552	250.00			
·	ation / Job title (See Instructions)  Employer (See Instruct y Veteran, Registered Nurse	ions)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# 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 Virgili	o Garcia	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)		
12/16/2021	6 Contributor address; City; State; Zip Code 11213 N. FM 88, Weslaco, TX, 78596	1,500.00		
8 Principal occu General Contr	position / Job title (See Instructions)  9	uctions)		
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)		
01/05/2022	Contributor address; City; State; Zip Code 1016 S. Mile 2 1/2 W, Weslaco, TX 78596	500.00		
Principal occupation / Job title (See Instructions)  Anesthetist/Advocate for Better Drainage, Accountant				
Date	Full name of contributor out-of-state PAC (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		
	ation / Job title (See Instructions) Employer (See Instruction Actor/Graduate Engineer	uctions)		
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)		
01/14/2022	Contributor address; City; State; Zip Code 1615 Laurel Ct., Donna, TX 78537	2,000.00		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Professional Engineer				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.					
The	Instruction Guide explains how to complete thi	s form.	1 Total pages Schedule A1:		
2 FILER NAME Juan Virgilio Garcia			3 Filer ID (Ethics Commission Filers)		
4 Date 01/08/2022	5 Full name of contributor out-of-state PAC (ID#:)  Robin and Judith DeHart		7 Amount of contribution (\$)		
	6 Contributor address; City; 16593 W. Barger Ct., Harlin	gen, TX 78552	250.00		
•	pation / Job title (See Instructions) ractor and Registered Nurse (Ret.)	9 Employer (See Instruc	tions)		
Date	Full name of contributor out-of-state PA	C (ID#:)	Amount of contribution (\$)		
12/22/2021	Contributor address; City; 480-B N. Sam Houston Blvd, San	State; Zip Code Benito, TX 78586	2,500.00		
Principal occupation / Job title (See Instructions)  General Contractor/Graduate Engineer  Employer (See Instructions)			tions)		
Date	Full name of contributor out-of-state PA	C (ID#:)	Amount of contribution (\$)		
	Contributor address; City;	State; Zip Code			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)		
Date	Full name of contributor out-of-state PA		Amount of contribution (\$)		
}	Contributor address; City;	State; Zip Code			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)					
, — <del>/ / / / - / - /</del>	- The same of the				
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS N	EEDED		

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

т	he Instruction Guide explains how to complete this for	n.	1 Total pages Schedule A2:
2 FILER NAM			3 Filer ID (Ethics Commission Filers)
Juan Virg	gilio Garcia		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date	6 Full name of contributor	)	8 Amount of 9 In-kind contribution
	Chuy's Custom Sports		Contribution \$   description
	7 Contributor address; City; State;	Zip Code	4,983.72   printing signs, push cards, campaign accessories
	1975 W. US Highway 77, San Benito, T	X 78586	   Check if travel outside of Texas. Complete Schedule T.
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	<b>15</b> Law firn	n of contributor's spouse (if any) (FOR JUDICIAL)
16 if contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor 🔲 out-of-state PAC (ID#:	)	Amount of In-kind contribution Contribution \$   description
	Contributor address; City; State;	Zìp Code	
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firn	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	r 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.

If the requested	d information is not applicable, <b>DO NO</b>	T include this page in the re	port.
The	Instruction Guide explains how to comp	lete this form.	1 Total pages Schedule E: 5
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Juan Virgilio	Garcia		
4 TOTAL OF UN	NITEMIZED LOANS		\$
5 Date of loan	7 Name of lender out-of-state	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, Harling	, ·	
YIN	37 10 Wild Fersimmon, Harring	en, 17 70002	11 Maturity date
12 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instructions)	<u>.</u>
Professional E			
14 Description of Coll	ateral	15 Check if personal fun account (See Instruc	ds were deposited into political tions)
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City;	State; Zip Code	-
■ not applicable			
20 Principal Occupat	tion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender out-of-state	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)	
Professional B	Engineer	,	
Description of Coll	ateral	Check if personal fun account (See Instruc	ds were deposited into political tions)
GUARANTOR INFORMATION	Name of guarantor	d-0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,	Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
■ not applicable			
·	on (See Instructions)	Employer (See Instructions)	
Professional Eng	Jineer		
lf le	ATTACH ADDITIONAL COP	IES OF THIS SCHEDULE AS NE	

ii iiie requestet	i information is flot applicable, DO NO	i iliciude tilis page ili tile re	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		
	NITEMIZED LOANS		\$
	4		
5 Date of loan	7 Name of lender	PAC (ID#:)	9 Loan Amount (\$)
10/01/2021	Juan V. Garcia		400.00
6 Is lender a financial Institution?	8 Lender address; City; 5718 Wild Persimmon, Harlinge	State; Zip Code	10 Interest rate
□ y ■ N	or to what dishinion, Hatting	en, 17 70002	11 Maturity date
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)	
Engineer			
14 Description of Coll	ateral	Check if personal fun- account (See Instruct	ds were deposited into political tions)
16 GUARANTOR	17 Name of guarantor		19 Amount Guaranteed (\$)
INFORMATION			To randant Cudatantees (p)
	18 Guarantor address; City;	State; Zip Code	
■ not applicable			
20 Principal Occupat	cion (See Instructions)	21 Employer (See Instructions)	1
Date of loan	Name of lender	PAC (\(\frac{1}{1}\)\(\frac{1}{2}\)	Loan Amount (\$)
10/07/2021	Juan V. Garcia	,	400.00
10/01/2021	Juan V. Garcia	•••••	Interest rate
Is lender a financial	Lender address; City;	State; Zip Code	niciostrate
Institution?	5718 Wild Persimmon, Harlinge	en, TX 78552	Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Engineer			
Description of Colla	ateral		
■ none		account (See Instruct	ds were deposited into political tions)
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
■ not applicable			
Principal Occupati	on (See Instructions)	Employer (See Instructions)	1
		<b></b>	
If le	ATTACH ADDITIONAL COP	ES OF THIS SCHEDULE AS NEE	

if the requested	intormation is not applicable, DO NO	i include this page in the re	porτ.
The	Instruction Guide explains how to compi	lete this form.	1 Total pages Schedule E:
² FILER NAME Juan Virgilio	Garcia		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UN	NITEMIZED LOANS		\$
5 Date of loan	7 Name of lender  ut-of-state	PAC (ID#: )	9 Loan Amount (\$)
10/19/2021	Juan V. Garcia		200.00
6 Is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate
T Y N	5718 Wild Persimmon, Harling	en, 17 70002	11 Maturity date
12 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instructions)	1
Engineer			
14 Description of Coll	ateral	Check if personal fun account (See Instruc	ds were deposited into political tions)
16 GUARANTOR INFORMATION	17 Name of guarantor	,	19 Amount Guaranteed (\$)
	18 Guarantor address; City;	State; Zip Code	
■ not applicable			
20 Principal Occupat	tion (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, Harlinge	en, IX 78552	Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Engineer			
Description of Coll	ateral	Check if personal fun account (See Instruct	ds were deposited into political tions)
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicable			
Principal Occupati	on (See Instructions)	Employer (See Instructions)	
If le	ATTACH ADDITIONAL COP	ES OF THIS SCHEDULE AS NEW struction guide for additional re	• • • • • • • • • • • • • • • • • • • •

ii the requested	u information is not applicable, <b>DO NO</b>	I include this page in the re	port.
The	Instruction Guide explains how to comp	lete this form.	1 Total pages Schedule E:
2 FILER NAME	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3 Filer ID (Ethics Commission Filers)
Juan Virgilio	Garcia		
4 TOTAL OF UN	NITEMIZED LOANS		\$
5 Date of loan	7 Name of lender out-of-state	PAC (ID#:)	9 Loan Amount (\$)
11/19/2021	Juan V. Garcia		2,676.25
6 Is lender a financial Institution?	8 Lender address; City; 5718 Wild Persimmon, Harling	State; Zip Code en, TX 78552	10 Interest rate  11 Maturity date
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)	<u> </u>
Professional E	Engineer		
14 Description of Coll	lateral	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; Zîp Code	
■ not applicable	-		
20 Principal Occupat	tion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender out-of-state	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, Harling	en, TX 78552	Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Engineer			
Description of Colli	ateral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)
GUARANTOR INFORMATION	Name of guarantor	.t.,	Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
■ not applicable			
Principal Occupati	on (See Instructions)	Employer (See Instructions)	
lf le	ATTACH ADDITIONAL COP	IES OF THIS SCHEDULE AS NEE	

#### SCHEDULE E **LOANS**

If the requested	i information is not applicable, DO NO	I include this page in the re	port.
The	Instruction Guide explains how to comp	lete this form.	1 Total pages Schedule E:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Juan Virgilio	Garcia		
	NITEMIZED LOANS		\$
5 Date of loan	7 Name of lender out-of-state	PAC (ID#:)	9 Loan Amount (\$)
12/04/2021	Juan V. Garcia		129.08
6 Is lender a financial	8 Lender address; City;	State; Zip Code	10 Interest rate
Institution?	5718 Wild Persimmon, Harling	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 fun account (See Instruc	ds were deposited into political tions)
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	PAC (ID#:)	Loan Amount (\$)
11/08/2021	Juan V. Garcia	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	750.00
Is lender a financial	Lender address; City;	State; Zip Code	Interest rate
Institution?	5718 Wild Persimmon, Harling	en, TX 78552	Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Description of Colli	aterai	Check if personal fun account (See Instruct	ds were deposited into political tions)
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
■ not applicable			
Principal Occupati	on (See Instructions)	Employer (See Instructions)	
IE I-		IES OF THIS SCHEDULE AS NEI	

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

## 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 Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Polling Expense Travel In District Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee 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 5 Payee name 4 Date 09/07/2021 La Feria Cafe 7 Payee address; City; 6 Amount (\$) 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 8 PURPOSE Food/Beverage Expense **Drainage District Informational Meeting** 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 Payee name 10/01/2021 Liz Gonzalez Designs Amount (\$) City: State: Zip Code Payee address; 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 **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 Date Payee name 10/01/2021 Jose Raymond Garcia Amount (\$) Payee address; Zip Code City; State; 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 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 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 Gitt/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 above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/V  The Instruction Guide explains how to c	/ages/Contract Labor complete this form.	Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
. •	Juan Virgilio Garcia		,	
4 Date	5 Payee name	,		
10/07/2021	Sanjuanita Mares			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
400.00	10529 W. Clark Rd., La Feria, TX 78	559		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Wages, salaries, contract labor	contract labor for campaign		
	(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/OF	Candidate / Officeholder name I	Office sought	Office held	
Date	Payee 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 OF EXPENDITURE	Wages, salaries, contract labor	tract labor contract labor for campaign		
	Check if travel oulside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
11/08/2021	Juan Virgilio Garcia			
Amount (\$)	Payee address;	Cíty;	State; Zip Code	
318.25	5718 Wild Persimmon, Harlingen, TX	78552		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Loan Reimbursement	Food/Beverage f drainage meeting		
The second secon	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, 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	SCHEDULE AS NEE	DED	

## 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District

Printing Expense Salaries/Wages/Contract Labor Legal Services 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 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 Loan Reimbursement Push card designs OF **EXPENDITURE** (c) Check if Iravel 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 11/12/2021 ACME Partnership, LP Amount (\$) Payee address; City: State: Zip Code 2,343.75 3701 Bee Cave Rd., Austin, TX 78746 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertising Expense Electronic Billboards (x2) 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 Date 11/19/2021 ACME Partnership, LP Amount (\$) Payee address; City; State Zip Code 3701 Bee Cave Rd., Austin, TX 78746 2,676.25 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertising Expense Electronic Billboards (x2) 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 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 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

Candidate/Officeholder/Politica Credit Card Payment		/ages/Contract Labor	Other (enter a category not listed above)
	The Instruction Guide explains how to c	emplete this form.	
1 Total pages Schedule F1:	2 FILER NAME Juan Virgilio Garcia		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	•	, , , , , , , , , , , , , , , , , , ,
11/27/2021	Juan Virgilio Garcia		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
2,343.75	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	Advertising on	electronic billboards
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
11/27/2021	Juan Virgilio Garcia		
Amount (\$)	Payee address;	City;	State; Zip Code
2,676.25	5718 Wild Persimmon, Harlingen, TX	78552	
	Category (See Categories listed at the top of this schedule)	Description	the second secon
PURPOSE OF EXPENDITURE	Loan Reimbursement	Advertising on	electronic billboards
	Check if travel outside of Texas. Complete Schedule T,	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
11/27/2021	Juan Virgilio Garcia		
Amount (\$)	Payee address;	City;	State; Zip Code
400.00	5718 Wild Persimmon, Harlingen, TX	78552	
**************************************	Category (See Categories listed at the top of this schedule)	Description	· -11 -16/7-0004004
PURPOSE OF EXPENDITURE	Loan Reimbursement	wages/food ex	pense for Jose Garcia
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin	ı, 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 S	SCHEDULE AS NEE	DED

# 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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	Other (enter a cate)	gory not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethi	cs Commission Filers)
	Juan Virgilio Garcia			
4 Date	5 Payee name			
11/27/2021	Juan Virgilio Garcia			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
400.00	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	wages/food ex	xpense for Sa	nJuanita Mares
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	itin, TX, officeholder livir	ng expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name I	Office sought Office held		Office held
Date	Payee name			
11/27/2021	Juan Virgilio Garcia			
Amount (\$)	Payee address;	City;	State;	Zip Code
200.00	5718 Wild Persimmon, Harlingen, TX	78552		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Loan Reimbursement wages/food expense for Jose Garcia			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		ng expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name	***************************************		
12/13/2021	Chuy's Custom Sports			
Amount (\$)	Payee address;	City;	State;	Zip Code
1,799.11	1975 W. US Highway 77, San Benito,	TX 78586		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising and Printing Expense	Signs, shirts, ր	push cards.	
	Check if travel outside of Texas, Complete Schedule T,	Check if Aust	tin, TX, officeholder livin	g 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 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 Gitl/Awards/Memorials Expense 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

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 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 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** Advertising Expense Electronic Billboard 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 12/21/2021 ACME Partnership, LP Amount (\$) Payee address; City; State; Zip Code 2,480.00 3701 Bee Cave Rd., Austin, TX 78746 Category (See Categories listed at the top of this schedule) Description PURPOSE Advertising Expense Electronic Billboards (x2) 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 12/23/2021 Benchmark Outdoor Media, LLC Amount (\$) Payee address; City; State; Zip Code 2120 N. Crockett St., Sherman, TX 75092 1,200.00 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertising Expense Electronic Billboards (x2) 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 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Oficeholder/Political Committee

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manas/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a catego	ry not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics	Commission Filers)
4 Date 11/08/2021	5 Payee name Real Strategic Solutions		<u>I</u>	, , , , , , , , , , , , , , , , , , , ,
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
750.00	P.O. Box 1526, Olmito, TX 78575			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Consulting Expense	Consult on strategy and voter data.		
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name I	Office sought		Office held
Date	Payee name			
01/14/2022	Chuy's Custom Sports			
Amount (\$)	Payee address;	City:	State;	Zip Code
2,500.00	1975 W. US Highway 77, San Benito	, TX 78586		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising and Printing Expense	Signs, Shirts, push cards, etc.		
	Check if travel outside of Texas, Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	•	Office held
Date	Payee name			
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 for Harlingen Baseball Boosters Golf Tournament		
	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	SCHEDULE AS NEE	DED	

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

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

Candidate/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to co	vages/Contract Labor	Other (enter a category not listed above)
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
	Juan Virgilio Garcia		
4 Date	5 Payee name		
11/23/2021	Cameron County Democratic Party		
6 Amount (\$)	7 Payee address;	City;	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 Democratic Candidate Filing Fee	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, 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		
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 Dominick's Day Event in Primera, T	
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
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	pense-Strategic Solns.
	Check if travel outside of Texas, Complete Schedule T,	Check if Austir	in, TX, officeholder living expense
Complete ONLY if direct	0 111 100 111	Office sought	Office held
expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Ollido Hold

#### 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 Gitt/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 11/23/2021 Cameron County Democratic Party 6 Amount (\$) 7 Payee address; City; 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 Filing Fee CC Democratic Candidate Filing Fee OF EXPENDITURE (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought 9 Complete ONLY if direct Office held expenditure to benefit C/OH 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 Benito, TX 78586 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Food/Beverage Expense Tacos for Dominick's Day Event in Primera, TX **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 Date Payee name Amount (\$) Payee address; City; State; Zip Code Category (See Categories listed at the top of this schedule) Description PURPOSE 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