JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to co	mplete this form.	1 Filer ID (Ethics Comm 00080188	,	2 Total pages	s filed: 28
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		E USE ONLY
OFFICEHOLDER NAME	The Honorable	Librado K.				
NAME					Date Received	
						CALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2024	
	Keno	Vasquez				
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Ύ;	ZIP CODE	Date Hand-delivere	ed or Date Postmarked
ADDRESS	REDACTED PER 2	54.0313. GOV'T (CODE		Receipt #	Amount
Change of Address						
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Mr.	Ricardo L.				
	NICKNAME	LAST			SUFFIX	
	Rick	Salinas				
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO	PO BOX PLEASE);	AP	T / SUITE #; CITY;	S	STATE; ZIP CODE
(Residence or Business)	REDACTED PER 2	54.0313, GOV'T (CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE PH (956) 584-3900	ONE NUMBER	EXTENSION			
8 REPORT TYPE	January 15	30th day before	e election	Runoff	15th day after	campaign treasurer
	X July 15	8th day before		Exceeded modified	appointment (officeholder only) Attach C/OH-FR)
				reporting limit	_	
9 PERIOD	Month Day Yea	ar		Month Day	Year	
COVERED	01/01/2024	Tł	HROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	ar F	Primary	Runoff	Other	
			Seneral	Special		
			Jeneral			
11 OFFICE	OFFICE HELD (if any) District Judge District 3	98 Hidalgo		12 OFFICE SOUGHT	(if known)	
				1		
		GO T	FO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	S	Ver	sion V4.1.0.d378aba

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 28

I

13 C / OH NAME	Veeguez Librada K	(The Henerable)	14 Filer ID	(Ethics Commission Filers)
	Vasquez, Librado K.		00080188	
15 NOTICE FROM POLITICAL COMMITTEE(S)	the candidate's or office	committees to support the eholder's knowledge or otice of such expenditures.		
Additional Pages		COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS	\$ 0.00			
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 7,500.00
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 28,726.21
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 306,677.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	y of perjury, that the ac Il information required t	companying report is to be reported by me
		The Honora	able Librado K. Vasc	quez
		Signature of	f Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
	•	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offic	er administering oath	Printed name of officer administering oath	Title of office	er administering oath
Forms provided by Tex	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.d378aba0

FORM JC/OH COVER SHEET PG 3 3 of 28

COV		

18 FILER NAM Vasquez, L	(Ethics	Commission Filers)					
20 SCHEDULE NAME OF S	SI	JBTOTAL AMOUNT					
1. X	1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$				
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	28,726.21			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$				
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$				

SUBTOTALS - JC/OH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this for	m. 1 Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/28
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Vasquez, Librado K. (The Honorable)	00080188
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
01/01/2024 Border Health PAC	\$5,000.00
6 Contributor address; City; State; Zip Code	
McAllen, TX 78504	
8 Contributor's Principal Occupation 9	Contributor's Job Title
10 Contributor's employer/law firm 11	Law firm of contributor's spouse (if any)
12 16 centrils stor is a child low firm of normatic) (if any)	
12 If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
01/25/2024 Wyatt Ranches of Texas, LLC	\$2,500.00
Contributor address; City; State; Zip Code	
Realitos, TX 78376	
Contributor's Principal Occupation	Contributor's Job Title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 1/24 Rpt: 5/28	Vasquez, Librado K. (The Honorable) 00080188							
4	Date 04/16/2024	Payee name 7-Eleven							
6	Amount (\$) \$73.96	Payee address; City; State; Zip Code 720 S 10th St McAllen, TX 78501 McAllen, TX 78501							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/22/2024	A&E Sports Embroidery Screen Printing							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$129.29	1106 S. Closner Blvd Edinburg, TX 78539							
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense Shirts						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/12/2024	Alamo Lion's Club							
	Amount (\$) \$250.00	Payee address;City;State;Zip Code420 N Taylor Rd							
		Alamo, TX 78516							
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER N	AME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/24 Rpt: 6/28		z, Librado K. (The Ho	onorable)				00080188
4	Date 03/28/2024	Payee na America	ame an Airlines					
6	Amount (\$) \$80.00	7 Payee address; City; State; Zip Code \$80.00 4255 Amon Carter Blvd Ft Worth, TX 76155						
8	PURPOSE OF EXPENDITURE	OF Travel Out of District					, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate	/Officeholder name	C	Office sou	ht		Office held
	Date	Payee n	ame					
	05/15/2024	Blue Ma	arlin Supermarket					
	Amount (\$)	Payee a	ddress; City;	State;	Zip Co	le		
	\$154.48	South F	adre Blvd Padre Island, TX 7859					
	PURPOSE OF EXPENDITURE		(See Categories listed at the everage Expense)	top of this sche	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ar
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate	/Officeholder name	C	Office sou	ht		Office held
	Date	Payee n	ame					
	03/26/2024	Buffalo	Bros					
	Amount (\$) \$118.37	Payee a 415 Thr	ddress; City; ockmorton St	State;	Zip Coo	le		
		Ft Wort	h, TX 76102					
	PURPOSE OF EXPENDITURE		(See Categories listed at the everage Expense)	top of this sche	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ing
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate	/Officeholder name	C	Office sou	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 3/24 Rpt: 7/28	Vasquez, Librado K. (The Honorable)	00080188				
4	Date 03/18/2024	5 Payee name CASA					
6	Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 1001 S 10th Ave Edinburg, TX 78539					
8	PURPOSE OF EXPENDITURE	Advertising Expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/25/2024	Chick Fil A					
	Amount (\$) \$36.84	Payee address; City; State; Zip Code 1201 W University Ave Edinburg, TX 78539					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Food/Beverage Expense Check if travel of	utside of Texas. Complete Schedule T. TX, officeholder living expense Peting				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/18/2024	Circle K					
	Amount (\$) \$18.00	Payee address; City; State; Zip Code 2808 S 23rd					
		McAllen, TX 78501					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment		Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T / - Gift/Awards/Memorials Expense Printing Expense T					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Sabadula E1:	5		ue explaine i	11000 10 00.		3	Filer ID (Ethics Commission Filers)
T	Total pages Schedule F1: Sch: 4/24 Rpt: 8/28		FILER NAME Vasquez, Librado K. (The H	lonorable)			3	Filer ID (Ethics Commission Filers) 00080188
4	Date	5	Payee name					
	03/04/2024		Circle K					
6	Amount (\$) \$71.98		Payee address; City; 2808 S 23rd McAllen, TX 78501	State;	; Zip Coo	le		
8	PURPOSE	(a)	Category (See Categories listed at the	e ton of this sch	edule)	(b) Description		
	OF EXPENDITURE		Travel In District			Check if travel		ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	03/29/2024		City of McAllen					
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le		
	\$24.00		2500 S Bicentennial Blvd McAllen, TX 78503					
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense parking fees Image: Check if Austin, TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	04/30/2024		Deluxe Bus Sys					
	Amount (\$) \$239.42		Payee address; City; 3680 Victoria St N	State;	; Zip Coo	le		
			Shoreview, MN 55126					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Accounting/Banking	e top of this sch	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense ign
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen Imittee Legal Services The Instruction Guide (Office Over Polling Exp Printing Ex Salaries/W	head/ ense pense ages/0	Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	5			100 10 23			3	Filer ID (Ethics Commission Filers)
T	Sch: 5/24 Rpt: 9/28		Vasquez, Librado K. (The Hon	orable)				3	O0080188
4	Date	5	Payee name						
	05/13/2024		El Tigre #22						
6	Amount (\$)	7	Payee address; City;	State	; Zip Coo	de			
	\$84.44		5925-TX 107						
			Mission, TX 78572						
8	PURPOSE	<u> </u>				(h)	Description		
0	OF	(a)	Category (See Categories listed at the top Travel In District	of this sch	nedule)	ן (ט) 1	Description Check if travel of	outsio	de of Texas. Complete Schedule T.
	EXPENDITURE					ř			officeholder living expense
						-	 Travel		
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	(Dffice sou	ght			Office held
	Date		Payee name						
	05/20/2024		El Tigre #22						
	Amount (\$)	├	Payee address; City;	State	; Zip Coo				
	\$79.13		5925-TX 107	Siale,	, zip cot	ie			
	\$79.13		5925-17 107						
			Mission, TX 78572						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Travel In District	of this sch	nedule)	[de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		candidate/Officeholder name	(Office soug	ght			Office held
	Date		Payee name						
	01/02/2024		El Tigre #27						
	Amount (\$)		Payee address; City;	State	; Zip Coo	1e			
	\$77.54		3301 N Shary Rd	Olule,	, 20 000				
	φ11.0-i								
			Mission, TX 78573						
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b)	Description		
	OF EXPENDITURE		Travel In District			[Check if travel of	outsi	de of Texas. Complete Schedule T.
	LAFENDITORE					I		TX,	officeholder living expense
						-	Travel		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	(Office sou	ght			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 6/24 Rpt: 10/28		Vasquez, Librado K. (The Honorable)	00080188			
4	Date 01/18/2024		Payee name El Tigre #27				
6	Amount (\$) \$71.81		Payee address; City; State; 3301 N Shary Rd Mission, TX 78573	Zip Co	de		
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel						
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ght		Office held
	Date		Payee name				
	02/08/2024		El Tigre #27				
	Amount (\$) \$72.58		Payee address; City; State; 3301 N Shary Rd	Zip Co	de		
		<u> </u>	Mission, TX 78573				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel In District	edule)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ght		Office held
	Date		Payee name				
	02/20/2024		El Tigre #27				
	Amount (\$) \$72.08		Payee address; City; State; 3301 N Shary Rd	Zip Co	de		
			Mission, TX 78573				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel In District	edule)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ght		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment		Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Sabadula E1	· · ·	3 Filer ID (Ethics Commission Filers)			
1	Total pages Schedule F1: Sch: 7/24 Rpt: 11/28	Vasquez, Librado K. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080188 00080188			
4	Date	Payee name	•			
	03/13/2024	El Tigre #27				
6	Amount (\$) \$81.78	Payee address; City; State; Zip Code 3301 N Shary Rd Mission, TX 78573				
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, 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				
	04/08/2024	El Tigre #27				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$70.58	3301 N Shary Rd Mission, TX 78573				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense			
		Travel				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	04/25/2024	El Tigre #27				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$75.11	3301 N Shary Rd				
		Mission, TX 78573				
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. atin, TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimb Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contrac The Instruction Guide explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)						
1	Sch: 8/24 Rpt: 12/28	Vasquez, Librado K. (The Honorable)	00080188						
4	Date	Payee name	· · ·						
	05/06/2024	El Tigre #27							
6	Amount (\$) \$78.62								
		Mission, TX 78573							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Travel Check if Austin, TX, officeholder living expense Travel									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	05/29/2024	El Tigre #27							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$73.61	3301 N Shary Rd Mission, TX 78573							
	PURPOSE OF EXPENDITURE		iption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense el Expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/05/2024	El Tigre #27							
	Amount (\$) \$59.22	Payee address; City; State; Zip Code 3301 N Shary Rd							
		Mission, TX 78573							
	PURPOSE OF EXPENDITURE		iption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense el Expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense bornmittee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)			
-	Sch: 9/24 Rpt: 13/28	Vasquez, Librado K. (The Honorable)	00080188			
4	Date	Payee name				
	06/17/2024	El Tigre #27				
6	Amount (\$)	Payee address; City; State; Zip Code				
	\$69.84	3301 N Shary Rd				
		Mission, TX 78573				
8	PURPOSE OF	b) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		outside of Texas. Complete Schedule T. , 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				
	05/16/2024	Espinoza, Michael				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$100.00	1405 S. 12th Ave				
		Edinburg, TX 78539				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense r			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/02/2024	Exxon				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$61.62	3301 N Shary				
		Mission, TX 78572				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 10/24 Rpt: 14/28		Vasquez, Librado K. (The Honorable)	00080188						
4	Date 03/25/2024	5	Payee name Exxon							
6	Amount (\$) \$83.57		Payee address; City; State; 3301 N Shary Mission, TX 78572	Zip Co	le					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Travel Check if Austin, TX, officeholder living expense Travel										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held			
	Date		Payee name							
	05/06/2024		Exxon							
	Amount (\$) \$14.00		Payee address; City; State; 3301 N Shary	Zip Co	le					
			Mission, TX 78572							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel In District	edule)			de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held			
	Date		Payee name							
	02/14/2024		Fuentes, Francisco							
	Amount (\$) \$100.00		Payee address; City; State; 13135 Cedar Ave	Zip Coo	le					
			Edinburg, TX 78541							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense ing breakfast			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 11/24 Rpt: 15/28	Vasquez, Librado K. (The Honorable) 00080188						
4	Date	5 Payee name						
	04/15/2024	Gabriela's Goals						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$500.00	4129 N 22nd						
		Ste 8						
		McAllen, TX 78504						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	501 c Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITORE	Check if Austin, TX, officeholder living expense						
		donation						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	03/06/2024	Garza, Elizabeth						
	Amount (\$)	Payee address; City; State; Zip Code						
\$500.00 900 E Stonegate Dr.								
		Mission, TX 78574						
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense GOTV 						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	02/07/2024	Garza, Leticia						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00	1233 W Austin Ln						
		Alamo, TX 78516						
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense BBQ Benefit 						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Offid/Awards/Memorials Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)						
-	Sch: 12/24 Rpt: 16/28	Vasquez, Librado K. (The Honorable)	00080188						
4	Date 02/01/2024	5 Payee name Girl Scout Troop-Troop 3004							
6	Amount (\$) \$480.00	Payee address; City; State; Zip Code 5317 N McColl Rd McAllen, TX 78501							
8	PURPOSE OF EXPENDITURE	OF Advertising Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/22/2024	Gonzalez, Rebecca							
	Amount (\$) \$3,500.00	Payee address;City;State;Zip Code900 E Stonegate Dr.							
		Mission, TX 78574							
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense ST						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	04/30/2024	Hidalgo County Bar Association							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 323 W Cano St							
		Edinburg, TX 78539							
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense Dr Grad/Donation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 13/24 Rpt: 17/28	Vasquez, Librado K. (The Honorable)	00080188							
4	Date 01/29/2024	Payee name Holiday Wine & Liquor								
6	Amount (\$) \$86.58	7 Payee address; City; State; Zip Code 58 2714 E Griffin Parkway Mission, TX 78572								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign meeting										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/22/2024	Jasso, Carlos								
Amount (\$)Payee address;City;State;Zip Code\$1,500.001409 S 9th Ave										
		Edinburg, TX 78539								
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/13/2024	Knights of Columbus								
	Amount (\$) \$120.00	Payee address;City;State;ZipCode1108 W Hackberry Ave								
		McAllen, TX 78501								
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District / - Gift/Awards/Memorials Expense Printing Expense Travel Out of District						Transportation Equipment & Related Expense Travel in District
1	Total pages Schedule F1:	FILER N	AME				3	Filer ID (Ethics Commission Filers)
	Sch: 14/24 Rpt: 18/28		z, Librado K. (The H	onorable)				00080188
4	Date 02/12/2024	Payee na Koko's N	ame Mexican Restaurant					
6	Amount (\$) \$860.43	Payee ao 6100 N McAllen		State;	; Zip Cod	e		
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Campaign Meeting					officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate	/Officeholder name	C	Office soug	ht		Office held
	Date	Payee na	ame					
	03/11/2024	LA Foga	ata					
	Amount (\$)	Payee ac	ldress; City;	State;	Zip Cod	e		
	\$216.73	300 N S Mission	hary Rd TX 78572					
	PURPOSE OF EXPENDITURE		(See Categories listed at the everage Expense	e top of this sch	edule) (n, TX,	de of Texas. Complete Schedule T. officeholder living expense ing
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate	/Officeholder name	C	Office soug	ht		Office held
	Date	Payee na	ame					
	02/06/2024	La Jaiba	ì					
	Amount (\$) \$373.54	Payee ad 400 W N Ste O McAllen		State;	Zip Cod	e		
	PURPOSE OF EXPENDITURE		(See Categories listed at the everage Expense	e top of this sch	edule)		n, TX,	de of Texas. Complete Schedule T. , officeholder living expense ing
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate	/Officeholder name	C	Office soug	ht		Office held
		_			_		_	

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hittee Legal Services The Instruction Guide explains h	Loan Repayment/Reimbursemeni Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	· .	•	3 Filer ID (Ethics Commission Filers)			
-	Sch: 15/24 Rpt: 19/28	/asquez, Librado K. (The Honorable)		00080188			
4	Date 04/23/2024	ayee name aura Hinojosa District Clerk					
6	Amount (\$)	-	Zip Code				
0	\$250.00	00 N. Clonsner					
		dinburg, TX 78539					
8	PURPOSE	ategory (See Categories listed at the top of this sche	dule) (b) Description				
	OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Jury Appreciation Week						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name O	ffice sought	Office held			
	Date	ayee name					
	05/08/2024	Ialdonado, Adrianna					
	Amount (\$)	ayee address; City; State;	Zip Code				
\$250.00 2000 N 23 St							
		IcAllen, TX 78501	Las				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Advertising Expense	Check if trav	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense gn Language Comp			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name O	ffice sought	Office held			
	Date	ayee name					
	03/18/2024	Memorial Elementary School					
	Amount (\$) \$125.00	Payee address; City; State; 700 S. Border Ave	Zip Code				
		Veslaco, TX 78596					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Advertising Expense	Check if trav	rel outside of Texas. Complete Schedule T. atin, TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name O	ffice sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services 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)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 16/24 Rpt: 20/28	Vasquez, Librado K. (The Honorable)	00080188					
4	Date	Payee name	I					
	01/09/2024	Nuestra Esperanza Primary Home Care						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,250.00	2700 E Griffin Pkway						
		Ste C						
		Mission, TX 78572						
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Loan Repayment/Reimbursement	outside of Texas. Complete Schedule T.					
	EXPENDITORE		, TX, officeholder living expense					
		unable to acc	cept corp checks					
9	Complete ONLV if direct	Candidate/Officeholder name Office sought	Office held					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Landidate/Onicenoider name Onice sought						
	Date	Payee name						
	05/06/2024	Ortega, Sonja						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$600.00	908 W Iroquois Ave						
		Pharr, TX 78577						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense ion Seminar/Room					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	02/20/2024	Palacios, Mary Alice						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$2,500.00	701 E Baker Drive						
		Edinburg, TX 78539						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 17/24 Rpt: 21/28	Vasquez, Librado K. (The Honorable)	00080188							
4	Date 04/16/2024	Payee name Pueblo Tires								
6	Amount (\$) \$128.75	7 Payee address; City; State; Zip Code 5128.75 620 W University Dr. Edinburg, TX 78539								
8	PURPOSE OF EXPENDITURE	OF Transportation Equipment And Related								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/12/2024	RGV Boys State Alumni Group								
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 1005 W Pike Blvd Weslaco, TX 78596								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DNATION							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/14/2024	Reyna, Mari								
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 1119 Sundance Dr.								
		Edinburg, TX 78542								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense port							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

				EXPENDITU	IRE CATEGO	RIES FOR	BC)X 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic			nmittee	Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services		Office Ove Polling Exp Printing Ex	rheac bense pense			Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	Equipment &	& Related Expense
	Credit Card Payment			The Instruction	Guide explains	how to co	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	(Ethics	Commission Filers)
	Sch: 18/24 Rpt: 22/28		Vasquez, L	ibrado K. (The	e Honorable)					00080188		
4	Date	5	Payee name									
	02/21/2024		Reyna, Ma									
6	Amount (\$)	7	Payee addre	ss; City;	State;	; Zip Co	de					
	\$2,000.00		1119 Sund	ance Dr.								
			Edinburg, T	X 78542								
8	PURPOSE	<u> </u>	-				(h)	Description				
ľ	OF			ee Categories listed a age Expense	at the top of this sch	iedule)	()	<u> </u>	outsi	de of Texas. Com	plete Sche	dule T.
	EXPENDITURE			elge _npenee				Check if Austin	, TX,	officeholder living) expense	
								Food/meals/b	beve	erage exper	nse voti	ng poll volunteers
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	06/27/2024		Reyna, Ma	i								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$1,000.00		1119 Sunda	ance Dr.								
			Edinburg, T	X 78542								
	PURPOSE OF			ee Categories listed a	at the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Accounting	/Banking						de of Texas. Com officeholder living		dule I.
			Campaign Reports/Bookkeeping									
	Complete ONLY if direct		andidate/Off	ceholder name	(Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date	1	Payee name									
	03/22/2024		Rodriguez,									
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$100.00		4101 Wichi			,						
			McAllen, T	K 78503								
	PURPOSE OF	(a)	Category (S	ee Categories listed a	at the top of this sch	iedule)	(b)	Description				
	EXPENDITURE		Accounting	/Banking						de of Texas. Com		dule T.
		1						Donation	, 17,	officeholder living	evhense	
		1						_ 0				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	ceholder name	(Office sou	ght			Office he	eld	
	-											

			EXPENDITURE CATE	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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (E	Ethics Commission Filers)		
-	Sch: 19/24 Rpt: 23/28	, ·	Vasquez, Librado K. (The Honorat	ole)				00080188			
4	Date 05/17/2024		Payee name Sapphire CAI								
6	Amount (\$) \$87.55	:	Payee address; City; S 310 A Padre Blvd South Padre Island, TX 78597	tate; Zip (Code						
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of thi Office Overhead/Rental Expense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought			Office held			
	Date		Payee name								
	04/22/2024		Science Academy PTSO								
	Amount (\$) Payee address; City; State; Zip Code \$500.00 900 Med High Dr.										
		<u> </u>	Mercedes, TX 78570		14.)						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of thi Advertising Expense	s schedule)	(0)		, TX,	de of Texas. Complet officeholder living ex _l D f			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought			Office held			
	Date		Payee name								
	04/15/2024		Southwest Javalina Football								
	Amount (\$) \$250.00		Payee address; City; S 300 E Ranch Blanco Rd	tate; Zip (Code						
			Pharr, TX 78577								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of thi Advertising Expense	s schedule)	(b)		, TX,	de of Texas. Complet officeholder living ex _l t			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought			Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide expla	ains h	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 20/24 Rpt: 24/28		Vasquez, Librado K. (The Honoral	ole)				00080188
4	Date 03/06/2024	5	Payee name Space Jump Rental					
6	Amount (\$)	7	Payee address; City; S	tate:	Zip Co	de		
-	\$1,500.00		813 W Ferguson Ave	,				
	\$1,000.00							
			Pharr, TX 78577					
_						<i>a</i> ,		
8	PURPOSE OF		Category (See Categories listed at the top of the	is sche	dule)	(b) Description	outoi	ide of Toylog, Complete Celedule T
	EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T. , officeholder living expense
						GOTV	, .,	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	Of	ffice souç	Jht		Office held
_	Date		Payee name					
	06/24/2024		State Bar of Texas					
				4040.	7:0 000			
	Amount (\$)			tate;	Zip Coo	le		
	\$240.00		1414 Colorado St					
			Austin, TX 78701					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Fees	is sche	dule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	Of	ffice souç	jht		Office held
	Date	ĺ	Payee name					
	01/25/2024		Sunoco					
	Amount (\$)		Payee address; City; S	tate.	Zip Co	10		
	\$54.47		3000 N Ware Rd	tato,	2.p 000			
	φ0-11							
			McAllen, TX 78501					
	PURPOSE	(a)	Category (See Categories listed at the top of thi	is sche	dule)	(b) Description		
	OF EXPENDITURE		Travel In District					ide of Texas. Complete Schedule T.
							, TX,	, officeholder living expense
						Travel		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	O	ffice souç	Jht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp mittee Legal Services The Instruction Guide		Loan Repa Office Over Polling Exp Printing Exp Salaries/Wa	head/Renta ense oense ages/Contra	al Expense act Labor		Travel in District Travel Out of Dist	uipment & Related Expense	
1	Total pages Schedule F1:	12		Explaine	1000 10 00.	ipiece		3	Filer ID	(Ethics Commission File	rc)
T	Sch: 21/24 Rpt: 25/28		Vasquez, Librado K. (The Ho	norable)				-	00080188		15)
4	Date	5	Payee name								
	01/30/2024		Sunoco								
6	Amount (\$) \$65.96		Payee address; City; 3000 N Ware Rd McAllen, TX 78501	State;	; Zip Coo	le					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Travel In District	op of this sch	nedule)		heck if travel o heck if Austin,		de of Texas. Comp officeholder living		
							-				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	(Office soug	ht			Office he	ld	
	Date		Payee name								
	02/12/2024		Team Mario								
	Amount (\$)		Payee address; City;	State	; Zip Coo	le					
	\$500.00		PO Box 2985 Edinburg, TX 78541								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Advertising Expense	op of this sch	nedule)		heck if travel o	, TX,	de of Texas. Comp officeholder living SS Event		
Complete <u>ONLY</u> if direct expenditure to benefit C/O			andidate/Officeholder name	(Office soug	ht			Office he	ld	
	Date		Payee name								
	01/02/2024		The Home Deport								
	Amount (\$) \$439.54		Payee address; City; 1200 S Shary Rd	State;	; Zip Coo	le					
			Mission, TX 78572								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to other	op of this sch	nedule)		heck if travel o heck if Austin,		de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht			Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee I	Event Expense Fees Food/Beverage Expe Sift/Awards/Memoria Legal Services The Instruction	als Expense	Office Over Polling Exp Printing Ex Salaries/W	rhead pense pens ages	e /Contract Labor		Solicitation/Fund Transportation E Travel in Districi Travel Out of Di OTHER (enter a	Equipment &	Related Expense
1	Total pages Schedule F1:	5				100 10 23			2	Filor ID	/⊏thics	Commission Filers)
1	Sch: 22/24 Rpt: 26/28	FILER NAME 3 Filer ID (Ethics Commission Filers) Vasquez, Librado K. (The Honorable) 00080188										
4	Date	5	Payee name									
	01/19/2024		Vasquez, Ke	no								
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de					
	\$400.00		2308 Windci	est Ln								
			Palmurst, T>	(78573								
8	PURPOSE	(a)					(h)	Decoription				
ľ	OF	(a)		e Categories listed a ead/Rental E		iedule)	(0)	Description	outsi	de of Texas. Con	plete Sche	dule T.
	EXPENDITURE		Onice Overn		лрепве					officeholder livin		
								storage fees				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	C	Dffice sou	ght			Office h	eld	
	Date		Payee name									
	04/02/2024		Vasquez, Ke	eno								
	Amount (\$)		Payee addres	s; City;	State:	; Zip Co	de					
	\$585.00		2308 Windci		Oluic,	, 20 000	ac					
	φ303.00		2000 Winder	COLLII								
			Palmurst, T>	(78573								
	PURPOSE	(a)	Category (See	e Categories listed a	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Loan Repay	ment/Reimbu	rsement					de of Texas. Con		dule T.
										officeholder livin	g expense	
								Ft Worth CLE	=			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	C	Office sou	ght			Office h	eld	
	•	i										
	Date		Payee name									
	04/18/2024		Vasquez, Ke	no								
	Amount (\$)		Payee addres	s; City;	State;	; Zip Co	de					
	\$645.79		2308 Windcr	est Ln								
			Palmurst, TX	(78573								
	PURPOSE	(a)	Category (See	e Categories listed a	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Loan Repay	ment/Reimbu	rsement					de of Texas. Con		dule T.
	EXPENDITORE									officeholder livin		
								Storage Fee/	Car	mpaign Sigi	าร	
	Complete ONLY if direct		Candidate/Offic	eholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	H										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related E Travel in District Travel Out of District OTHER (enter a category not listed abo		
1	Total pages Schedule F1:	2		• • •			3	Filer ID (Ethics Commissi	on Filers)	
1	Sch: 23/24 Rpt: 27/28		Vasquez, Librado K. (The Honorable) 3 Filer ID 00080188							
4	Date	5	Payee name							
	06/03/2024		Vasquez, Keno							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coc	le				
	\$200.00		2308 Windcrest Ln							
			Palmurst, TX 78573							
_										
8	PURPOSE OF		Category (See Categories listed		edule)	(b) Description	outo	ida af Taylaa, Camplata Cabadula T		
	EXPENDITURE		Loan Repayment/Reimbi	ursement				ide of Texas. Complete Schedule T. , officeholder living expense		
								mpaign signs		
						eterage i ee				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	С	Office soug	ht		Office held		
	Date		Payee name							
	02/14/2024		Vazaldua, Paul							
	Amount (\$)		Payee address; City;	State:	; Zip Coc	10				
	.,		205 W Iris	Siale,	, zip cou	ie				
	\$500.00		205 W IIIS							
			McAllen, TX 78501							
	PURPOSE OF EXPENDITURE		Category (See Categories listed Advertising Expense	at the top of this sch	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Office soug	ht		Office held		
	Date		Payee name							
	04/01/2024		Vazaldua, Paul							
-	Amount (\$)		Payee address; City;	State:	; Zip Coc					
	\$750.00		205 W Iris	State,	, zip cou					
	Φ150.00		205 10 115							
			McAllen, TX 78501							
	PURPOSE	(a)	Category (See Categories listed	at the top of this sch	iedule)	(b) Description				
	OF EXPENDITURE		Advertising Expense			Check if travel	outs	ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						Social Media	L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
_	Sch: 24/24 Rpt: 28/28	Vasquez, Librado K. (The Honorable)	00080188					
4	Date 04/24/2024	5 Payee name Vazaldua, Paul						
6	Amount (\$) \$695.00	 Payee address; City; State; Zip Code 205 W Iris McAllen, TX 78501 						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Autism Mission Event								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	02/14/2024	Villalon , Ruperto						
	Amount (\$) \$650.00	Payee address; City; State; Zip Code 2005 Nightingale Ave						
		McAllen, TX 78504						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense CtiON					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	04/30/2024	Vipers B Ball						
	Amount (\$) \$300.00	Payee address;City;State;Zip Code315 E Palm Dr						
		Edinburg, TX 78539						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense e League					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					