

GUSTAVO RUIZ

**8 Days Before
Election the
March 1, 2022**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 23	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Gustavo	MI C.	OFFICE USE ONLY Date Received CAMERON COUNTY DEPARTMENT OF ELECTIONS & VOTER REGISTRATION 1:52pm FEB 22 2022 Date Hand-delivered or Data Entered By: <i>[Signature]</i> Receipt # _____ Amount \$ _____ Date Processed _____ Date Imaged _____
	NICKNAME Gus	LAST Ruiz	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 21434 Retame Rd. Harlingen TX 78550			
	AREA CODE PHONE NUMBER EXTENSION (956) 421-4373			
5 CANDIDATE / OFFICEHOLDER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1106 E. Tyler Harlingen, TX 78550 <small>(Residence or Business)</small>			
	AREA CODE PHONE NUMBER EXTENSION (956) 421-4373			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Robert	MI	
	NICKNAME Davis	LAST Davis	SUFFIX Jr.	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>				
8 CAMPAIGN TREASURER PHONE				
9 REPORT TYPE				
10 PERIOD COVERED				
11 ELECTION				
12 OFFICE		13 OFFICE SOUGHT (if known)		
14 NOTICE FROM POLITICAL COMMITTEE(S)				

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Gustavo C. Ruiz</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,750.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 19,039.73
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 18,993.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 11,092.05

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

Gustavo C. Ruiz

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Gustavo C. Ruiz, and my date of birth is 2-10-81.

My address is 21434 Retama Rd., Harlingen, TX, 78550, USA.
(street) (city) (state) (zip code) (country)

Executed in Cameron County, State of Texas, on the 21 day of February, 2022.
(month) (year)

Gustavo C. Ruiz

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME <i>Gustavo C Ruiz</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,750.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,743.56
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 17,296.17
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1,743.56
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

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: 7
2 FILER NAME Gustavo C. Ruiz		3 Filer ID (Ethics Commission Filers)
4 Date 1-27-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alfonso Salazar	7 Amount of contribution (\$) \$ 500.00
6 Contributor address; City; State; Zip Code 414 E. Hickman Ave. Port Isabel TX 78578		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1-27-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Fuentes	Amount of contribution (\$) \$ 1,000.00
Contributor address; City; State; Zip Code 3619 S Border Ave. Weslaco, TX 78596		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2-1-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IT Engineering	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code PO Box 149 La Feria TX 78559		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2-2-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAM RUIZ	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code 24565 N. Kansas City Rd. La Feria TX 78559		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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:

7

2 FILER NAME

Gustavo C. Ruiz

3 Filer ID (Ethics Commission Filers)

4 Date

2-2-22

5 Full name of contributor

Josue Ruiz

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 500.00

6 Contributor address;

City;

State;

Zip Code

24471 N. Kansas City Rd. La Feria, TX
78559

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-2-22

Full name of contributor

George Lazaro

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 500.00

Contributor address;

City;

State;

Zip Code

133 E. Magnolia Ave. La Feria, TX 78559

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-2-22

Full name of contributor

Ashbeas LLC

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 500.00

Contributor address;

City;

State;

Zip Code

9211 W. Bus 83 Harlingen, TX 78552

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-2-22

Full name of contributor

Alejandro Gallaga

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 500.00

Contributor address;

City;

State;

Zip Code

3530 Garrett Rd. Harlingen, TX 78552

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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:

7

2 FILER NAME

Gustavo C. Ruiz

3 Filer ID (Ethics Commission Filers)

4 Date

1-21-22

5 Full name of contributor

out-of-state PAC (ID#: _____)

LDG Enterprises LLC

7 Amount of contribution (\$)

\$ 2,500.00

6 Contributor address;

City;

State;

Zip Code

2805 Fountain Plaza Blvd. Suite A
Edinburg, TX 78539

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-1-22

Full name of contributor

out-of-state PAC (ID#: _____)

Winstead State PAC

Amount of contribution (\$)

\$ 500.00

Contributor address;

City;

State;

Zip Code

2728 North Hanwood St. Ste. 500 Dallas, TX
75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-21-22

Full name of contributor

out-of-state PAC (ID#: _____)

Bharat Patel

Amount of contribution (\$)

\$ 1,500.00

Contributor address;

City;

State;

Zip Code

800 Convention Center Blvd.
McAllen, TX 78501

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-2-22

Full name of contributor

out-of-state PAC (ID#: _____)

Jose Caso

Amount of contribution (\$)

\$ 1,250.00

Contributor address;

City;

State;

Zip Code

301 Rio Grande Dr. Mission, TX 78572

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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:

7

2 FILER NAME

Gustavo C. Ruiz

3 Filer ID (Ethics Commission Filers)

4 Date

1-21-22

5 Full name of contributor

out-of-state PAC (ID#: _____)

Primo Trading Services LLC

7 Amount of contribution (\$)

\$ 1,000.00

6 Contributor address;

City;

State;

Zip Code

PO Box 3599 McAllen, TX 78502

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-1-22

Full name of contributor

out-of-state PAC (ID#: _____)

Wayne Lowry

Amount of contribution (\$)

\$ 1,000.00

Contributor address;

City;

State;

Zip Code

PO Box 3419 Harlingen, TX 78551

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-31-22

Full name of contributor

out-of-state PAC (ID#: _____)

Juan Delsado

Amount of contribution (\$)

\$ 500.00

Contributor address;

City;

State;

Zip Code

14909 N. 23rd. st.
Edinburg, TX 78541

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-31-22

Full name of contributor

out-of-state PAC (ID#: _____)

Rene Capistran

Amount of contribution (\$)

\$ 1,000.00

Contributor address;

City;

State;

Zip Code

3512 LA Soledad Court
Brownsville, TX 78520

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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:

7

2 FILER NAME

Gustavo C. Ruiz

3 Filer ID (Ethics Commission Filers)

4 Date

1-31-22

5 Full name of contributor

Alfredo Garcia Jr.

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 1,000.00

6 Contributor address;

153 Lakeview South

City;

State;

Zip Code

San Benito, TX

78586

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1-21-22

Full name of contributor

John Guevara

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 250.00

Contributor address;

3205 Seminole Court

City;

State;

Zip Code

Harlingen, TX

78550

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-21-22

Full name of contributor

Robert Guevara

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 250.00

Contributor address;

1909 Tangerine Dr.

City;

State;

Zip Code

Harlingen, TX

78552

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-25-22

Full name of contributor

William T. Peacock

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 500.00

Contributor address;

PO Box 530098

City;

State;

Zip Code

Harlingen, TX

78553

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

7

2 FILER NAME

Gustaw C Ruiz

3 Filer ID (Ethics Commission Filers)

4 Date

1-21-22

5 Full name of contributor

Linda Alaniz

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 500.00

6 Contributor address;

3505 Pebble Beach Dr.
Harlingen, TX 78550

City;

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1-27-22

Full name of contributor

Cameron Salazar

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 500.00

Contributor address;

414 E. Hickman Ave.
Port Isabel, TX 78578

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-21-22

Full name of contributor

Joe Lopez

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 500.00

Contributor address;

2 Conquistador Pr.
Brownsville, TX 78520

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-10-22

Full name of contributor

Scot Campbell

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 500.00

Contributor address;

1210 E. Tyler
Harlingen, TX 78550

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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:

7

2 FILER NAME

Gustavo C. Ruiz

3 Filer ID (Ethics Commission Filers)

4 Date

2-10-22

5 Full name of contributor

out-of-state PAC (ID#: _____)

Kevin Campbell

7 Amount of contribution (\$)

\$ 500.00

6 Contributor address;

City;

State;

Zip Code

1210 E. Tyler Harlingen, TX 78550

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-11-22

Full name of contributor

out-of-state PAC (ID#: _____)

Haley Law Firm PLLC

Amount of contribution (\$)

\$ 100.00

Contributor address;

City;

State;

Zip Code

1617 E. Tyler Ave. Ste A
Harlingen, TX 78550

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-21-22

Full name of contributor

out-of-state PAC (ID#: _____)

Diana Olivarez

Amount of contribution (\$)

\$ 100.00

Contributor address;

City;

State;

Zip Code

26059 Castillo Rd.
San Benito, TX 78586

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-6-22

Full name of contributor

out-of-state PAC (ID#: _____)

Josue Cano

Amount of contribution (\$)

\$ 300.00

Contributor address;

City;

State;

Zip Code

27258 Baker Potts Rd.
Harlingen, TX 78552

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E: 5
2 FILER NAME Gustavo C. Ruiz		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 2-18-22	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	9 Loan Amount (\$) 57.64
6 Is lender a financial institution? Y (N)	8 Lender address; City; State; Zip Code 21434 Retama Rd. Harlingen, TX 78550	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) County Commissioner		13 Employer (See Instructions) Cameron County
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan 2-15-22	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	Loan Amount (\$) 200.00
Is lender a financial institution? Y (N)	Lender address; City; State; Zip Code 21434 Retama Rd. Harlingen TX 78550	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Cameron County
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E: 5
2 FILER NAME Gustavo C. Ruiz		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 2-17-22	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	9 Loan Amount (\$) 32.42
6 Is lender a financial institution? Y (D)	8 Lender address; City; State; Zip Code 21434 Retama Rd. Hanlingen, TX 78550	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) County Commissioner		13 Employer (See Instructions) Cameron County
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan 2-14-22	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	Loan Amount (\$) 75.34
Is lender a financial institution? Y (D)	Lender address; City; State; Zip Code 21434 Retama Rd. Hanlingen, TX 78550	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Cameron County
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E: 5
2 FILER NAME Gustavo C. Ruiz		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 2-16-22	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	9 Loan Amount (\$) 100.00
6 Is lender a financial institution? Y <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code 21434 Retama Ad. Harlingen, TX 78550	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) County Commissioner		13 Employer (See Instructions) Cameron County
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan 2-17-22	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	Loan Amount (\$) 98.45
Is lender a financial institution? Y <input checked="" type="radio"/>	Lender address; City; State; Zip Code 21434 Retama Ad. Harlingen, TX 78550	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Cameron County
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E: 5
2 FILER NAME Gustavo C. Ruiz		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 2-13-22	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C. Ruiz	9 Loan Amount (\$) 283.97
6 Is lender a financial institution? Y <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code 21434 Betama Rd. Harlingen, TX 78550	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) County Commissioner		13 Employer (See Instructions) Cameron County
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan 2-12-22	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo C Ruiz	Loan Amount (\$) 244.87
Is lender a financial institution? Y <input checked="" type="radio"/>	Lender address; City; State; Zip Code 21434 Betama Rd. Harlingen, TX 78550	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) CAMERON COUNTY
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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 E:
5

2 FILER NAME

Gustavo C. Ruiz

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

2-13-22

7 Name of lender

Gustavo C. Ruiz

out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

489.92

6 Is lender a financial institution?

Y

8 Lender address;

21434 Retama Rd

City;

State;

Zip Code

Hanlingen, TX 78550

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

County Commissioner

13 Employer (See Instructions)

Cameron County

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address;

City;

State;

Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

2-14-22

Name of lender

Gustavo C. Ruiz

out-of-state PAC (ID#: _____)

Loan Amount (\$)

160.95

Is lender a financial institution?

Y

Lender address;

21434 Retama Rd

City;

State;

Zip Code

Hanlingen, TX 78550

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

County Commissioner

Employer (See Instructions)

Cameron County

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address;

City;

State;

Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME Gustavo C. Ruiz	3 Filer ID (Ethics Commission Filers)
4 Date 1-20-22	5 Payee name David Munguia	
6 Amount (\$) 400.00	7 Payee address; City; State; Zip Code 12317 Tio Cano Rd. La, Feria TX 78559	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1-31-22	Payee name Lamar Advertising Company	
Amount (\$) 2,375.00	Payee address; City; State; Zip Code 2001 Industrial Way San Benito, TX 78586	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2-2-22	Payee name David Munguia	
Amount (\$) 600.00	Payee address; City; State; Zip Code 12317 Tio Cano Rd. La, Feria TX 78559	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME GUSTAVO C RUIZ	3 Filer ID (Ethics Commission Filers)
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4 Date 2/22	5 Payee name Carlos chairez
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6 Amount (\$) 616.73	7 Payee address; 3106 melissa Ln. Hanlingen, TX 78552	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) contract labor	(b) Description Campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2-7-22	Payee name Humane Society of Hanlingen
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Amount (\$) 1,500.00	Payee address; 1106 Markowsky Ave. Hanlingen, TX 78550	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2-8-22	Payee name Carisma Print & Design
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Amount (\$) 5,975.00	Payee address; 2165 US military Hwy 281 Brownsville TX 78520	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME Gustavo C. Ruiz	3 Filer ID (Ethics Commission Filers)
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4 Date 2-9-22	5 Payee name Nelda Ibarra
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6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 631 Winchell St. San Benito, TX 78586
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) contract labor	(b) Description campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2-14-22	Payee name Rosa Gomez
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Amount (\$) 600.00	Payee address; City; State; Zip Code PO Box 821 Harlingen, TX 78551
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2-16-22	Payee name Carisma Print & Design
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Amount (\$) 2,354.44	Payee address; City; State; Zip Code 2165 us military Hwy 281 Brownsville, TX 78520
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Advertising
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4	2 FILER NAME Gustavo C. Ruiz	3 Filer ID (Ethics Commission Filers)
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4 Date 2-18-22	5 Payee name Lamar Advertising Company
--------------------------	--

6 Amount (\$) 2,375.00	7 Payee address; City; State; Zip Code 2001 Industrial Way San Benito, TX 78586
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 4	2 FILER NAME Gustavo C. Ruiz	3 Filer ID (Ethics Commission Filers)
4 Date 2-18-22	5 Payee name Henny's	
6 Amount (\$) 57.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 715 S Lewis Lane Hanlingen, TX 78552	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense	(b) Description campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2-15-22	Payee name Stripes	
Amount (\$) 200 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2426 E. Loop 499 Hanlingen, TX 78550	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense / Gas	Description campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2-17-22	Payee name Stripes	
Amount (\$) 32.42 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 206 Val Verde Ave. Santa Rosa Ave. TX 78593	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 4	2 FILER NAME Gustavo C. Ruiz	3 Filer ID (Ethics Commission Filers)
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4 Date 2-14-22	5 Payee name Dollar General
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6 Amount (\$) 75.34 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2310 E. Tyler Ave. Harlingen, TX 78550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Beverage Expense	(b) Description campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2-16-22	Payee name HEB
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Amount (\$) 100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1213 S Commerc Harlingen, TX 78550
--	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Gas Expense	Description campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2-17-22	Payee name Cannicenia del Valle 4
-----------------	--------------------------------------

Amount (\$) 98.45 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 638 N. Ed Carey Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 4	2 FILER NAME Gustavo C. Ruiz	3 Filer ID (Ethics Commission Filers)
4 Date 2-13-22	5 Payee name Lowes	
6 Amount (\$) 283.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4705 South Expressway 777 Hanlingen, TX 78550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense / tents	(b) Description CAMPAIGN
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 2-12-22	Candidate / Officeholder name Payee name Mc Coys	
Amount (\$) 244.87 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Office sought Office held Payee address; City; State; Zip Code 3601 W. Expressway 83 Hanlingen, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense / T posts	Description campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 2-13-22	Candidate / Officeholder name Payee name Sams	
Amount (\$) 489.92 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Office sought Office held Payee address; City; State; Zip Code 621 N. Expressway 777 Hanlingen, TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage Expense / Tables Chairs	Description CAMPAIGN
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <p style="text-align:center">4</p>	2 FILER NAME <p style="text-align:center">Gustavo C. Ruiz</p>	3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align:center">2-14-22</p>	5 Payee name <p style="text-align:center">Sams</p>	
6 Amount (\$) <p style="text-align:center">160.95</p> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <p style="text-align:center">621 N. Expressway 77 Harlingen, TX 78550</p>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <p style="text-align:center">Food/Beverage Expense</p>	(b) Description <p style="text-align:center">Campaign</p>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
	Office sought	Office held
Amount (\$)	Payee name	
<input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
	Office sought	Office held
Amount (\$)	Payee name	
<input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
	Office sought	Office held
Amount (\$)	Payee name	
<input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED