

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) N/A	2 Total pages filed: 17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Pedro I	OFFICE USE ONLY Date Received CITY SECRETARY'S OFFICE 2016 JAN 15 PM 3:56 RECEIVED	
	NICKNAME LAST SUFFIX (Pete) Saenz Jr.		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1501 Chihuahua Laredo, Texas 78040		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 712-4448		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Pedro I	Receipt # Amount \$ Date Processed Date Imaged	
	NICKNAME LAST SUFFIX (Pete) Saenz III		
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1501 Chihuahua St. Laredo, Texas 78040 (Residence or Business)		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 744-0365		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 07 / 01 / 2015 THROUGH 01 / 15 / 2016		
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Mayor of Laredo		13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

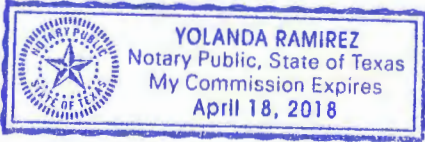
14 C/OH NAME Pedro I. (Pete) Saenz, Jr.	15 Filer ID (Ethics Commission Filers) N/A
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

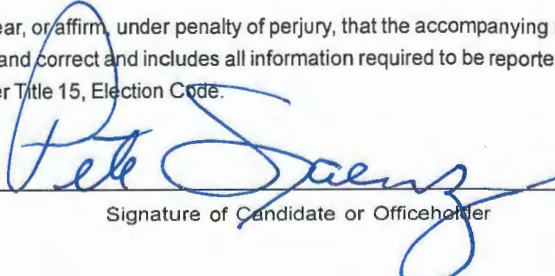
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 33,200.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,005.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 23,352.25
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 120,000.00

18 AFFIDAVIT

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.



AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Pete Saenz, Jr, this the 15th / 15 / 2018 day of January, 2016, to certify which, witness my hand and seal of office.

Yolanda Ramirez

Signature of officer administering oath

Yolanda Ramirez

Printed name of officer administering oath

Notary Public

Title of officer administering oath

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Pedro I. (Pete) Saenz, Jr.		3 Filer ID (Ethics Commission Filers) N/A
4 Date 10/28/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arturo N. Benavides Sr. <hr/> 6 Contributor address; City; State; Zip Code 1202 E. Del Mar Blvd. Ste. 3 Laredo, Texas 78041	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/6/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy De Anda <hr/> Contributor address; City; State; Zip Code P.O. Box 440077 Laredo, Texas 78044	Amount of contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/6/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peggy J. Newman <hr/> Contributor address; City; State; Zip Code P.O. Box 2008 Laredo, Texas 78045	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Community Leader		Employer (See Instructions)
Date 11/6/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killam Development, LTd. <hr/> Contributor address; City; State; Zip Code P.O. Box 499 Laredo, Texas 78041	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) N/A

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME
Pedro I. (Pete) Saenz, Jr.

3 Filer ID (Ethics Commission Filers)
N/A

4 Date
11/06/2015

5 Full name of contributor out-of-state PAC (ID#: _____)
Robert N. Freeman II

7 Amount of contribution (\$)
\$250.00

6 Contributor address; City; State; Zip Code
7817 Sonoma Ct.
Laredo, Texas 78045

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)

Date
11/06/2015

Full name of contributor out-of-state PAC (ID#: _____)
James & Sonia Kelly, Jr.

Amount of contribution (\$)
\$300.00

Contributor address; City; State; Zip Code
102 Redwing Ct.
Laredo, Texas 78045

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Pedro I. (Pete) Saenz, Jr.

3 Filer ID (Ethics Commission Filers)

N/A

4 Date

11/6/2015

5 Full name of contributor

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

P.R. Slaughter, Jr.

6 Contributor address;

City; State; Zip Code

7737 Marquette

Dallas, Texas 75225

7 Amount of contribution (\$)

\$800.00

8 Principal occupation / Job title (See Instructions)

Community Leader

9 Employer (See Instructions)

Date

11/6/2015

Full name of contributor

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

Douglas Macdonald

Contributor address;

City; State; Zip Code

2709 Jones Dr.

Laredo, Texas 78045

Amount of contribution (\$)

\$2,500.00

Principal occupation / Job title (See Instructions)

Banker

Employer (See Instructions)

Date

11/11/2015

Full name of contributor

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

Edmundo Ramirez Newman

Contributor address;

City; State; Zip Code

304 Bordeaux Dr.

Laredo, Texas 78041

Amount of contribution (\$)

\$800.00

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

Date

11/16/2015

Full name of contributor

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

Fasken Management, LLC.

Contributor address;

City; State; Zip Code

6101 Holiday Hill Rd.

Midland, Texas 79707-1631

Amount of contribution (\$)

\$2,500.00

Principal occupation / Job title (See Instructions)

Engineers

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Pedro I. (Pete) Saenz, Jr.

3 Filer ID (Ethics Commission Filers)

N/A

4 Date

11/16/2015

5 Full name of contributor

Gary G. Jacobs

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

6 Contributor address;

P.O. Box 119

Laredo, Texas 78042

City; State; Zip Code

7 Amount of contribution (\$)

\$800.00

8 Principal occupation / Job title (See Instructions)

Real Estate Developer

9 Employer (See Instructions)

Date

11/16/2015

Full name of contributor

Robert J. Cadena

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

Contributor address;

411 Jordan Dr.

Laredo, Texas 78041

City; State; Zip Code

Amount of contribution (\$)

\$800.00

Principal occupation / Job title (See Instructions)

Community Leader

Employer (See Instructions)

Date

11/16/2015

Full name of contributor

Roberto P. Martinez, Jr.

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

Contributor address;

P.O. Box 450583

Laredo, Texas 78045

City; State; Zip Code

Amount of contribution (\$)

\$800.00

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Howland Engineering Surveying

Date

11/16/2015

Full name of contributor

South Webb County, LTD.

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

Contributor address;

P.O. Box 3229

Laredo, Texas 78044

City; State; Zip Code

Amount of contribution (\$)

\$2,500.00

Principal occupation / Job title (See Instructions)

C.P.A.

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Pedro I. (Pete) Saenz, Jr.		3 Filer ID (Ethics Commission Filers) N/A
4 Date 11/16/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete Lozano 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackstone Dilworth Contributor address; City; State; Zip Code 400 FM 534 Sandia, Texas 78383	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate Developer		Employer (See Instructions)
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve Lamantilla Contributor address; City; State; Zip Code 402 Nye Laredo, Texas 78041	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) L&F Distributors
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gus Dwairy Contributor address; City; State; Zip Code 16030 Market St. Channelview, Texas 77530	Amount of contribution (\$) \$1,000.00
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Pedro I. (Pete) Saenz, Jr.		3 Filer ID (Ethics Commission Filers) N/A
4 Date 11/16/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmo & Consuelo F. Lopez Sr. 6 Contributor address; City; State; Zip Code 1919 Galveston St. Laredo, Texas 78043	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raul & Graciela S. Martinez Contributor address; City; State; Zip Code 117 Idaho Laredo, Texas 78041	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Gubser Contributor address; City; State; Zip Code 10804 Marfa Rd. Laredo, Texas 78045	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onecimo Benavides, Jr. Contributor address; City; State; Zip Code 206 McPherson Laredo, Texas 78041	Amount of contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Pedro I. (Pete) Saenz, Jr.		3 Filer ID (Ethics Commission Filers) N/A
4 Date 11/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rob Roy Jennings III <hr/> 6 Contributor address; City; State; Zip Code 901 Norman Dr. Laredo, Texas 78045	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Community Leader		9 Employer (See Instructions)
Date 11/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBC State Political Action Committee <hr/> Contributor address; City; State; Zip Code 130 E. Travis Laredo, Texas 78205	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) C.P.A.		Employer (See Instructions)
Date 11/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viviana & Frank Rotnofsky <hr/> Contributor address; City; State; Zip Code 503 Guadalupe St. Laredo, Texas 78040	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickey Peña Arquitects <hr/> Contributor address; City; State; Zip Code 600 San Bernardo Ave., Ste. 901 Laredo, Texas 78040	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Pedro I. (Pete) Saenz, Jr.

3 Filer ID (Ethics Commission Filers)

N/A

4 Date

11/24/2015

5 Full name of contributor

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

Victor R. Ramirez

7 Amount of contribution (\$)

\$1,500.00

6 Contributor address;

City; State; Zip Code

9510 Del Mar Circle

Laredo, Texas 78521

8 Principal occupation / Job title (See Instructions)

Community Leader

9 Employer (See Instructions)

Date

12/24/2015

Full name of contributor

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

Margarita R. Rubio

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

8220 Eagle Ridge Ct.

Laredo, Texas 78045

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/24/2015

Full name of contributor

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

Trepac/Texas Association of Realtors

Amount of contribution (\$)

\$1,750.00

Contributor address;

City; State; Zip Code

P.O. Box 2246

Austin, Texas 78768-2246

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Pedro I. (Pete) Saenz, Jr.	3 Filer ID (Ethics Commission Filers) N/A
4 Date 7/1/2015	5 Payee name Facebook	
6 Amount (\$) \$60.00	7 Payee address; City; State; Zip Code N/A	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <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 7/6/2015	Payee name Vonage	
Amount (\$) \$17.96	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Telephone Expense	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 Candidate / Officeholder name Office sought Office held	
Date 8/3/2015	Payee name Facebook	
Amount (\$) \$14.00	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	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 Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Pedro I. (Pete) Saenz, Jr.	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 8/3/2015	5 Payee name Facebook
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6 Amount (\$) \$48.00	7 Payee address; City; State; Zip Code N/A
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <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
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Date 8/5/2015	Payee name Vonage
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Amount (\$) \$17.96	Payee address; City; State; Zip Code N/A
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Telephone Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/1/2015	Payee name Facebook
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Amount (\$) \$62.00	Payee address; City; State; Zip Code N/A
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> 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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Pedro I. (Pete) Saenz, Jr.	3 Filer ID (Ethics Commission Filers) N/A
4 Date 9/8/2015	5 Payee name PMDG	
6 Amount (\$) \$2,750.00	7 Payee address; City; State; Zip Code N/A	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <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 9/8/2015	Payee name Vonage	
Amount (\$) \$17.96	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Telephone Expense	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 Candidate / Officeholder name Office sought Office held	
Date 10/1/2015	Payee name Facebook	
Amount (\$) \$60.00	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	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 Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Pedro I. (Pete) Saenz, Jr.	3 Filer ID (Ethics Commission Filers) N/A
4 Date 10/5/2016	5 Payee name Vonage	
6 Amount (\$) \$18.15	7 Payee address; City; State; Zip Code N/A	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Telephone Expense	(b) Description <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 11/2/2015	Candidate / Officeholder name Facebook	
Amount (\$) \$62.00	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name Office sought Office held	
Date 11/15/2015	Payee name Square, Inc.	
Amount (\$) 49.45	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Credit Card Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Pedro I. (Pete) Saenz, Jr.	3 Filer ID (Ethics Commission Filers) N/A
4 Date 11/5/2015	5 Payee name Vonage	
6 Amount (\$) \$18.15	7 Payee address; City; State; Zip Code N/A	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Telephone Expense	(b) Description <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 11/12/2015	Payee name Square Inc.	
Amount (\$) \$.49	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Credit Card Fees	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 Candidate / Officeholder name Office sought Office held	
Date 11/16/2015	Payee name PMDG	
Amount (\$) \$6,588.29	Payee address; City; State; Zip Code N/A	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	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 Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Pedro I. (Pete) Saenz, Jr.	3 Filer ID (Ethics Commission Filers) N/A			
4 Date 11/23/2015	5 Payee name PMDG				
6 Amount (\$) \$4,063.23	7 Payee address; City; State; Zip Code N/A				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 12/1/2015	Payee name Facebook				
Amount (\$) \$62.00	Payee address; City; State; Zip Code N/A				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 12/7/2015	Payee name Vonage				
Amount (\$) \$18.15	Payee address; City; State; Zip Code N/A				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Telephone Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:12.5%;">Office sought</td> <td style="width:12.5%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Pedro I. (Pete) Saenz, Jr.	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 12/28/2015	5 Payee name Monica Saenz Vigil
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6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1501 Chihuahua St. Laredo, Texas 78040
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/4/2016	Payee name Facebook
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Amount (\$) \$60.00	Payee address; City; State; Zip Code N/A
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/5/2016	Payee name Vonage
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Amount (\$) \$18.15	Payee address; City; State; Zip Code N/A
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Telephone Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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