

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:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <i>MR.</i> <i>JUAN</i> <i>I.</i> NICKNAME LAST SUFFIX <i>MIKE</i> <i>VALVERDE</i>	OFFICE USE ONLY Date Received FILED FOR RECORD AT 1:42 M JAN 15 2016 KARA SANDS CLERK, COUNTY COURT, NUECES COUNTY, TEXAS BY: <i>Rafaela Acosta</i> DEPUTY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>221 TROPICAL LN., CC, TX 78408</i>	Date Hand-delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 882-8996	Receipt # Amount \$ Date Processed Date Imaged	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <i>MRS.</i> <i>VERONICA</i> <i>L.</i> NICKNAME LAST SUFFIX <i>VALVERDE</i>	Date Hand-delivered or Date Postmarked	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>7249 YAUPON DR., CC, TX 78414</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 737-2091		
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 <i>11 / 16 / 2015</i> THROUGH <i>01 / 15 / 2016</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>03 / 01 / 2016</i>	ELECTION TYPE <input checked="" 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)	13 OFFICE SOUGHT (if known) <i>CONSTABLE PREINCT ONE</i>	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

14 C/OH NAME JUAN I. VALVERDE 15 Filer ID (Ethics Commission Filers)

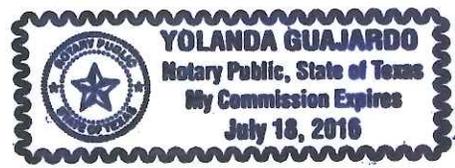
16 NOTICE FROM POLITICAL COMMITTEE(S)

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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		<u>N/A</u>
	COMMITTEE ADDRESS	<u>N/A</u>
	COMMITTEE CAMPAIGN TREASURER NAME	<u>N/A</u>
	COMMITTEE CAMPAIGN TREASURER ADDRESS	<u>N/A</u>

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>374.01</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>1782.27</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>-0-</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>8738.69</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>566.82</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>-0-</u>

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.

Juan I. Valverde
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Juan I. Valverde, this the 15 day of January, 2016, to certify which, witness my hand and seal of office.

Yolanda Guajardo
Signature of officer administering oath

Printed name of officer administering oath

Notary
Title of officer administering oath

< 12/11/2015-01/10/2016 v >

Adjust Close of Day Default

Campaign Account

Date	Deposit ID	Transaction Count	Amount
Pending		2	\$20.42 >
01/06/2016	3Z3SRKNYDMYM8YB3RFMCRAP3QDJS	1	\$13.61 >
12/30/2015	3ZXPTHXEXFEG8YB3RFMCRAP3QDJS	1	\$6.81 >
12/29/2015	3ZMX27TX5ENC8YB3RFMCRAP3QDJS	2	\$54.46 >
12/28/2015	3Z9SYK1D5DW88YB3RFMCRAP3QDJS	6	\$88.48 >
12/28/2015	3Z9SYJZGNDW88YB3RFMCRAP3QDJS	1	\$27.23 >
12/28/2015	3Z9SYJXGDDW88YB3RFMCRAP3QDJS	1	\$0.97 >

211.01

Actual Deposit

211.01
 168.00
 \$ 379.01

NCE CREDIT UNION
701 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

01/11/16-10:07 AM
Tran#: 00531
Flr#: 005-adv
Loc#: 00002

Member 663785
JUAN VALVERDE
CAMPAIGN
121 TROPICAL LANE
CORPUS CHRISTI TX 78400

Receipts

Acct Id: -00

Share Deposit	163.00
new Balance	566.82

Receipt Receipt

Cash Received	163.00
---------------	--------

Signature: _____

TOTAL SALES
\$163.00

GRAND
TOTAL of SALES
\$ 374.01

SUBTOTALS - COH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>JUAN I. VALVERDE</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	\$ <i>1,300.00</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>54.13</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>-0-</i>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ <i>5,000.00</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ <i>6,013.13</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>-0-</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
8.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ <i>8,725.56</i>
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>-0-</i>
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>-0-</i>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1

2 FILER NAME

JUAN I. VALVERDE

3 Filer ID (Ethics Commission Filers)

4 Date

11/16/15

5 Full name of contributor

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

MR. NOE VALVERDE

6 Contributor address; City; State; Zip Code

9337 MOON BEAM, CC, TX 78409

7 Amount of contribution (\$)

\$1000.00

8 Principal occupation / Job title (See Instructions)

RETIRED

9 Employer (See Instructions)

N/A

Date

12/29/15

Full name of contributor

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

MRS. CORINA LOVE

Contributor address; City; State; Zip Code

18706 APPLE TREE HILL, HOUSTON, TX 77054

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

N/A

Date

01/08/16

Full name of contributor

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

MRS. MARY ANN VALVERDE-GOMEZ

Contributor address; City; State; Zip Code

839 RETAMA DR., CC, TX 78408

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

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.

RECEIPT

DATE 11-16-15No. 115603RECEIVED FROM Noe Valverde\$ 1000.00PO BOX 4387 COTX 78469 241 0803

DOLLARS

 FOR RENT FORCampaign Contribution - One ThousandACCOUNT # 1955

PAYMENT

BAL. DUE

 CASH CHECK MONEY ORDER CREDIT CARD

FROM _____ TO _____

BY Veronica Valverde

NCE CREDIT UNION
901 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

11/18/15-01:50 PM
Tran#: 00191
TL#: 002-rac
Doc#: 00008

Member 663758
JUAN VALVERDE
CAMPAIGN
221 TROPICAL LANE
CORPUS CHRISTI TX 78408

Receipts

Acct Id: -00

Share Deposit	1,000.00
New Balance	3,000.00

Receipt Receipt

CR# 1555chce valverde	1,000.00
-----------------------	----------

Signature: _____

RECEIPT

DATE 12-29-15No. 115601RECEIVED FROM Corina Love 713-837-4576 \$200.00
18706 Apple Tree Hill Ln TX Houston 77054 DOLLARS FOR RENT FORCampaign Contribution Two Hundred

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY ORDER CREDIT CARD

FROM _____ TO _____

BY Veronica R. Halverda

RECEIPT

DATE 1-8-16No. 115602RECEIVED FROM Mary Ann Valverde-Gomez\$ 100.00One Hundred Campaign Contribution DOLLARS FOR RENT FOR839 Ratama Ct Ty 78408 585-3555

ACCOUNT	
PAYMENT	
BAL. DUE	

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM _____ TO _____

BY Veronica R. Valverde

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1	
2 FILER NAME JUAN I. VALVERDE		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 54.13	
5 Date 12/15/15	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MR. FONZIE MUNOZ	8 Amount of Contribution \$ 54.13	9 In-kind contribution description PRINTING COST BBQ TICKETS
7 Contributor address; City; State; Zip Code 4501 S. ALAMEDA, CC, TX 78412		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) PHOTOGRAPHER		11 Employer (FOR NON-JUDICIAL) (See Instructions) OWNER	
12 Contributor's principal occupation (FOR JUDICIAL) N/A		13 Contributor's job title (FOR JUDICIAL) (See Instructions) N/A	
14 Contributor's employer/law firm (FOR JUDICIAL) N/A		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) N/A	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

PARKDALE PRINTING

(361) 854-4101
4337 S. Alameda • Antiques Row
Corpus Christi, Texas 78412

INVOICE 8171

		DATE	12-15-15	
NAME Vote Valverde				
ADDRESS for Constable				
CITY				
No. of Copies	Pages	Price Per Page		
720	tickets			50.00
	Stupic			
Paid Cash				
Fonzie Munoz 4501 So. Alameda cc, TX 78412		Sales Tax		4.13
		TOTAL		54.13
Thank You!		RECEIVED BY		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME JUAN I. VALVERDE		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ - 0 -
5 Date of loan 10/23/15	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) JUAN I. VALVERDE	9 Loan Amount (\$) 5,000.00
6 Is lender a financial Institution? Y (N)	8 Lender address; City; State; Zip Code 221 TROPICAL LN, CC, TX 78408	10 Interest rate - 0 -
		11 Maturity date - 0 -
12 Principal occupation / Job title (See Instructions) N/A		13 Employer (See Instructions) N/A
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
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	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input 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.

NEW

NCE CREDIT UNION
901 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

10/23/15-01:46 PM
Tran#: 00263
Tr#: 005-adv
Doc#: 00024

Member: 663755
JUAN VALVERDE
CAMPAIGN
221 TROPICAL LANE
CORPUS CHRISTI TX 78406

Receipts

Acct Id: -00

Membership fee	15.00-
New Balance	500.00

Receipt Recapt

Signature: _____

NCE CREDIT UNION
901 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

10/23/15-01:46 PM
Trans#: 00242
Trf#: 005-adv
Doc#: 00023

Member 636803
JUAN I VALVERDE
221 TROPICAL LANE
CORPUS CHRISTI TX 78400

Transfer Vouchers

Acct Id: -09

Share W/D-Transfer	515.00
Transfer Fee	3.00
New Balance	10,047.53

Acct Id: JUAN VALVERDE

Share Deposit-Transfer	515.00
New Balance	#####

Receipt Recap:

Signature: _____

NCE CREDIT UNION
701 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

10/23/15-01:48 PM
Tran#: 00264
Tr#: 005-adv
Doc#: 00028

Member 636805
JUAN I VALVERDE
221 TROPICAL LANE
CORPUS CHRISTI TX 78408

Transfer Vouchers

Acc: Id: -00

Share M/D-Transfer	4,500.00
Transfer Fee	.00
New Balance	5,547.53

Acc: Id: JUAN VALVERDE

Share Deposit-Transfer	4,500.00
New Balance	#####

Receipt Recap:

Signatures: _____

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: <i>1 of 3</i>	2 FILER NAME <i>JUAN I. VALVERDE</i>	3 Filer ID (Ethics Commission Filers)			
4 Date <i>12/02/15</i>	5 Payee name <i>JUAN LEAL TOP QUALITY GRAPHICS</i>				
6 Amount (\$) <i>5,175.00</i>	7 Payee address; City; State; Zip Code <i>4531 AYERS ST., CC, TX 78415</i>				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>YARD SIGNS, 4x4 SIGNS, BUTTONS</i> <i>PRINTING EXPENSE</i>	(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:33%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:33%;">Candidate / Officeholder name <i>JUAN I. VALVERDE</i></td> <td style="width:33%;">Office sought <i>CONSTABLE PRECINCT 1</i></td> <td style="width:15%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>	Office held		
Date <i>12/04/15</i>	Payee name <i>DOWNTOWN POST OFFICE</i>				
Amount (\$) <i>9.80</i>	Payee address; City; State; Zip Code <i>802 N. TANCAHUA ST., CC, TX 78401</i>				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>STAMPS</i> <i>OFFICE EXPENSE</i>	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:33%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:33%;">Candidate / Officeholder name <i>JUAN I. VALVERDE</i></td> <td style="width:33%;">Office sought <i>CONSTABLE PRECINCT 1</i></td> <td style="width:15%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>	Office held		
Date <i>12/06/15</i>	Payee name <i>DOLLAR TREE STORE, INC.</i>				
Amount (\$) <i>2.17</i>	Payee address; City; State; Zip Code <i>1620 S. PADRE ISLAND DR., CC, TX 78416-1353</i>				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>CLEAR TAPE ROLL</i> <i>OFFICE EXPENSE</i>	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:33%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:33%;">Candidate / Officeholder name <i>JUAN I. VALVERDE</i></td> <td style="width:33%;">Office sought <i>CONSTABLE PRECINCT 1</i></td> <td style="width:15%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>	Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



INVOICE

9633

THE QUALITY SHOP ABOVE THE REST
 4531 Ayers St. Ste 308 361-851-8346
 Corpus Christi, Texas 78415 Juan Leal

S	JUAN VALVERDE	S	
O		H	
L		I	
D		P	
T		T	
O		O	
DATE	SHIPPED	TERMS	SALESMAN
11/24/15			
CUSTOMER ORDER NO.			
QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
100	18x24 YARD SIGNS	\$1,500	
50	4'x4' SIGNS	\$3,250	
50	BUTTONS	\$250	
100	STANDS	\$175	
	PAID CASH \$2,900	11/16/15	
	PAID CASH \$2,050	11/24/15	
	PAID CASH \$250	12/31/15	
PLEASE PRINT YOUR NAME HERE		SALES TAX	
Juan Valverde		TOTAL	\$5,175

DOWNTOWN STA
802 N TANCAHUA ST
CORPUS CHRISTI
TX

784019998
4820200410

12/04/2015 (800)275-8777 2:44 PM

Product Description	Sale Qty	Final Price
Star Spangled PSA (Unit Price:\$9.80)	1	\$9.80

Total \$9.80

Cash \$10.00
Change (\$0.20)

BRIGHTEN SOMEONE'S MAILBOX. Greeting cards available for purchase at select Post Offices.

Order stamps at usps.com/shop or call 1-800-Stamp24. Go to usps.com/clicknship to print shipping labels with postage. For other information call 1-800-ASK-USPS.

Get your mail when and where you want it with a secure Post Office Box. Sign up for a box online at usps.com/poboxes.

All sales final on stamps and postage
Refunds for guaranteed services only
Thank you for your business

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RECENT
POSTAL EXPERIENCE

Go to:
<https://postalexperience.com/Pos>

or scan this code with
your mobile device:



or call 1-800-410-7420.

YOUR OPINION COUNTS

Bill #: 840-57800576-1-213184-2
Clerk: 13

Stamps



DOLLAR TREE STORES, INC.®

Store# 3107 (361) 851-6702
1620 S Padre Island Dr
Suite 400
Corpus Christi TX 78416-1353

DESCRIPTION	QTY	PRICE	TOTAL
CLEAR TAPE	1	1.00	1.00T
CLEAR TAPE	1	1.00	1.00T

Sub Total \$2.00
 SALES TAX \$0.17
 Total \$2.17
 Cash \$3.00

CHANGE =====> \$-0.83

Thank You for Shopping at Dollar Tree
Where Everything's \$1.00
Now Shop On-Line at Dollartree.com

 * We value your opinion! *
 * Please provide your feedback at *
 * www.dollartreefeedback.com *
 * Receive chances to win \$1,000 daily plus *
 * instant prizes valued at \$1,500 weekly *
 * or by calling 1-877-368-2540. *
 * For complete rules, eligibility and sweepstakes *
 * period and previous winners please visit *
 * www.dollartreefeedback.com *
 * No purchase/survey required to enter. *
 * Sweepstakes sponsored by Empathica, Inc. *
 * across multiple international clients. *
 * Survey Code: 2630 0467 6371 0016 *
 * *
 * We will gladly exchange any unopened item *
 * with original receipt. We do not offer refunds. *

4667 03107 03 011 46165 12/06/15 18:29
Sales Associate:Irene

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: <i>2 of 3</i>	2 FILER NAME <i>JUAN I. VALVERDE</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/07/15</i>	5 Payee name <i>CARLOS LOPEZ MAJIC 104.9 FM</i>	
6 Amount (\$) <i>500.00</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 270547, CC, TX 78427</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>RADIO/TV SERVICE</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<i>LOAN PAYMENT/REIMBURSEMENT</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Date <i>12/08/15</i>	Payee name <i>VALERO - STRIPES #9438</i>	
Amount (\$) <i>20.00</i>	Payee address; City; State; Zip Code <i>4101 AGNES ST., CC, TX 78405-3317</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>FUEL (SIGN DISTRIBUTION)</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<i>EVENT EXPENSE</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Date <i>12/17/15</i>	Payee name <i>THE HOME DEPOT</i>	
Amount (\$) <i>92.16</i>	Payee address; City; State; Zip Code <i>4038 S. PORT AVE, CC, TX 78415</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>STEEL T-POST (F/SIGNS)</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<i>SUPPLY-EVENT EXPENSE</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

major 1079

Wells Fargo Bank Transaction Receipt

Store #0004684 3	Deposit
Account Number	XXXXXX8832
CHK 00808	
Cash In	\$500.00
Total Deposit	\$500.00

Deposit will be available:	
Date	Amount
12/07/2015	\$500.00

Transaction # 081 0104
 04:12PM 12/07/15
 Deposit Credit Date: 12/07/15

TIP: You can order and review your free credit report at least once a year to ensure all reported payment history and account records remain accurate at annualcreditreport.com

Thank you, JANET

NCE CREDIT UNION
 901 LEOPARD SUITE 114
 CORPUS CHRISTI TX 78401
 NCE CREDIT UNION

12/07/15-02:27 PM
 Tran#: 00829
 Tr#: 004-bgg
 Doc#: 00019

Member 663755
 JUAN VALVERDE
 CAMPAIGN
 221 TROPICAL LANE
 CORPUS CHRISTI TX 78408

Receipts

Acct Id: -00

Share W/D-Cash	500.00
Excess Number of MO's Fee	3.00
New Balance	191.00

Receipt Recap:

Cash Disbursed	500.00
----------------	--------

Signature: *Juan P Valverde*



NO. 00296

P.O. Box 270547
 Corpus Christi, Texas 78427
 (361) 289-8877
 Email:
 carloslopezmagic@yahoo.com

Salesman Carlos Lopez Date 12-3-15
 Advertiser Juan V. Verde Condado Pace
 Address Corpus Christi Mgr. Juan V. Verde
 Product Politic LPR Starting Date _____
 Approved By: _____

Announcements

Live Length 7-8 Tape

Program LA VOZ Abel Alonzo Show

Length 1:30 Studio _____ Remote _____

Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat
Jan 5th	4	5 7-8	6	7	TV 8	\$2
wk of Feb 23	22	23 7-8	24	25	TV 26	\$1
			Ch No #			
			682			

Total No. Times 20x Expiration Date _____

Rates: for _____ Broadcasts:

Net Station Time	Talk	Live Service	Other Cl
\$	\$	\$	\$

Total Per Broadcast:

For Contract

Could not find Item UPC data.



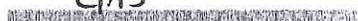
STRIPES #9438
4101 AGNES ST
CORPUS CHRISTI, TX 78405-3317

RECHARGE: \$20.00
CARD RECHARGED

Card #: 72631-6011393723178862
ITEM: 72631
TXN ID: 167482575
TXN TIME: 12/08/2015 10:57:16 PM

Amount: \$ 20.00

GAS



7 99366 34194 9



**More saving.
More doing.SM**

4038 SOUTH PORT AVENUE
CORPUS CHRISTI, TX 78415 (361)853-9173

6584 00022 50280 12/17/15 08:29 AM
CASHIER MONICA - MXZ3904

755588602510 6FT T POST <A>
6' STEEL T-POST 1.25
22@3.87

85.14

SUBTOTAL 85.14
SALES TAX 7.02
TOTAL \$92.16
CASH 100.00
CHANGE DUE 7.84



6584 22 50280 12/17/2015 7037

RETURN POLICY DEFINITIONS

A POLICY ID DAYS POLICY EXPIRES ON
1 90 03/16/2016

THE HOME DEPOT RESERVES THE RIGHT TO
LIMIT / DENY RETURNS. PLEASE SEE THE
RETURN POLICY SIGN IN STORES FOR
DETAILS.

BUY ONLINE PICK-UP IN STORE
AVAILABLE NOW ON HOMEDEPOT.COM.
CONVENIENT, EASY AND MOST ORDERS
READY IN LESS THAN 2 HOURS!

**ENTER FOR A CHANCE
TO WIN A \$5,000
HOME DEPOT GIFT
CARD!**

Share Your Opinion With Us! Complete
the brief survey about your store visit
and enter for a chance to win at:

www.homedepot.com/opinion

**¡PARTICIPE EN UNA
OPORTUNIDAD DE GANAR
UNA TARJETA DE
REGALO DE THD
DE \$5,000!**

¡Comparta Su Opinión! Complete la breve
encuesta sobre su visita a la tienda y
tenga la oportunidad de ganar en:

www.homedepot.com/opinion

**User ID:
HLJ 107433 100871**

**Password:
15617 100849**

Entries must be entered by 01/16/2016.
Entrants must be 18 or older to enter.
See complete rules on website. No
purchase necessary.

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: <i>3 of 3</i>	2 FILER NAME <i>JUAN I. VALVERDE</i>	3 Filer ID (Ethics Commission Filers)			
4 Date <i>01/08/16</i>	5 Payee name <i>NUECES COUNTY CLERK KARA SANDS</i>				
6 Amount (\$) <i>14.00</i>	7 Payee address; City; State; Zip Code <i>901 LEOPARD ST, RM 201, CC, TX 78401</i>				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>PRECINCT AREA MAP FEE</i> <i>OTHER</i>	(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:33%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:33%;">Candidate / Officeholder name <i>JUAN I. VALVERDE</i></td> <td style="width:17%;">Office sought <i>CONSTABLE PRECINCT 1</i></td> <td style="width:17%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>	Office held		
Date <i>01/09/16</i>	Payee name <i>MR. MIKE GUERRA</i>				
Amount (\$) <i>200.00</i>	Payee address; City; State; Zip Code <i>1913 HORNERD., CC, TX 78416</i>				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>INTERENTAINMENT - MUSIC FUNDRAISER EVENT EXPENSE</i>	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:33%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:33%;">Candidate / Officeholder name <i>JUAN I. VALVERDE</i></td> <td style="width:17%;">Office sought <i>CONSTABLE PRECINCT 1</i></td> <td style="width:17%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>	Office held		
Date	Payee name				
Amount (\$)	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			
	<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:17%;">Office sought</td> <td style="width:17%;">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		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Receipt# 752956

KARA SANDS
COUNTY CLERK
NUECES COUNTY
901 LEOPARD ST.
ROOM 201
CORPUS CHRISTI, TX
78401
(361) 888-0580

DUPLICATE RECEIPT
Printed: Jan 8 2016 2:54:45 PM

Type: MAP COPIES Cnt: 1
MAPS \$ 14.00

Total \$ 14.00
Cash Tendered \$ 20.00
Change Due \$ 6.00
Balance \$ 0.00

Total Documents: 1
Total Fees: 1

Client Name GENERAL PUBLIC
Filed By VERONICA VALVERDE
Jan 8 2016 2:54:44 PM

Cashier: LVASQUEZ

Comment:
3617372091

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: <i>1 of 4</i>	2 FILER NAME <i>JUAN I. VALVERDE</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11/04/15</i>	5 Payee name <i>NUECES COUNTY DEMOCRATIC PARTY</i>	
6 Amount (\$) <i>1,000.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>P.O. BOX 853, CC, TX 78403</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>FEE'S</i> <i>CANDIDATE FILING FEE</i>	(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 <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Date <i>11/08/15</i>	Payee name <i>VISTA PRINT NETHERLANDS B.V.</i>	
Amount (\$) <i>367.98</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>275 WYMAN ST., WALTHAM, MA. 02451</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>CARDS/HANGERS/MAGNETS</i> <i>PRINTING EXPENSE</i>	(b) 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 <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>
Date <i>11/16/15</i>	Payee name <i>TOP QUALITY GRAPHICS JUAN LEAL</i>	
Amount (\$) <i>5,000.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>4531 AYERS ST., STE 308, CC, TX 78415</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>SIGNS (YARD & LARGE) BUTTONS</i> <i>PRINTING EXPENSE</i>	(b) 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 <i>JUAN I. VALVERDE</i>	Office sought <i>CONSTABLE PRECINCT 1</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

0004681 11-24
Office AU # 1210(8)

PERSONAL MONEY ORDER

0468116606

Remitter: JUAN I VALVERDE
Operator I.D.: tx003786



Nueces County DEMOCRATIC PARTY

November 14, 2015

PAY TO THE ORDER OF

P.O. Box 853 • Corpus Christi, TX 78403
www.NuecesDemocrats.org • 361-334-6179

One thousand dollars and no cents

\$1,000.00

Payee Address:
Memo:

WELLS FARGO BANK, N.A.
4251 S ALAMEDA ST
CORPUS CHRISTI, TX 78412
FOR INQUIRIES CALL (480) 394-3122

VOID IF OVER US \$ 1,000.00

Juan I. Valverde
Purchaser's Signature

⑈0468116606⑈ ⑆121000248⑆4861 505733⑈

0004681 11-24
Office AU # 1210(8)

PERSONAL MONEY ORDER

SERIAL #: 0468116606

Remitter: JUAN I VALVERDE
Purchaser: JUAN I VALVERDE
Purchaser Account: 1005348832
Operator I.D.: tx003786
Funding Source: Cash

ACCOUNT#: 4861-505733

November 14, 2015

PAY TO THE ORDER OF

DEMOCRATIC PARTY

One thousand dollars and no cents

\$1,000.00

Payee Address:
Memo:

WELLS FARGO BANK, N.A.
4251 S ALAMEDA ST
CORPUS CHRISTI, TX 78412
FOR INQUIRIES CALL (480) 394-3122

NOTICE TO PURCHASER—IF STOP PAYMENT IS PLACED ON THIS INSTRUMENT, WELLS FARGO BANK MAY IMPOSE A WAITING PERIOD BEFORE ISSUING A REPLACEMENT OR REFUND.

VOID IF OVER US \$ 1,000.00

NON-NEGOTIABLE

Purchaser Copy

FB004 M4203 50170617

Filing Fee \$1,000.00
\$ 250.00

NCE CREDIT UNION
901 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

11/04/15-09:54 AM
Trans#: 00115
Trf#: 002-Fac
Dch#: 00009

Member 636803
JUAN I VALVERDE
221 TROPICAL LAKE
CORPUS CHRISTI TX 78406

Receipts

Acct Id: -00
Share Withdrawal 1,250.00
Excess Number of MO's Fee .00
New Balance 2,197.53

Receipt Recap:
Cash Disbursed 1,250.00

Juan I. Valverde

All information is required to be provided unless indicated as optional.

APPLICATION FOR A PLACE ON THE DEMOCRATIC PARTY GENERAL PRIMARY BALLOT

TO: State/County Chair

I request that my name be placed on the above-named official primary ballot as a candidate for nomination to the office indicated below.

OFFICE SOUGHT (Include any place number or other distinguishing number, if any.)
 NUECES COUNTY CONSTABLE, PRECINCT ONE

INDICATE TERM

FULL
 UNEXPIRED

FULL NAME (First, Middle, Last)
 JUAN ISMAEL VALVERDE

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT
 JUAN (MIKE) I. VALVERDE

PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.)
 221 TROPICAL LANE

PUBLIC MAILING ADDRESS (Address for which you receive campaign related correspondence.)
 221 TROPICAL LANE

CITY
 CORPUS CHRISTI

STATE
 TX

ZIP
 78408

CITY
 CORPUS CHRISTI

STATE
 TX

ZIP
 78408

PUBLIC EMAIL ADDRESS (if available)

OCCUPATION (Do not leave blank)

DATE OF BIRTH

VOTER REGISTRATION VOID NUMBER¹ (Optional)

DEPUTY CONSTABLE PCT 1

07 / 21 / 1950

TELEPHONE CONTACT INFORMATION (Optional)

Home: (361) 882-8996

Work: (361) 888-0503

Cell: (361) 249-2617

LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN

IN STATE

IN TERRITORY ELECTED FROM

23 year (s)

_____ year (s)

11 month(s)

_____ month(s)

If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election.

Before me, the undersigned authority, on this day personally appeared (name) Juan Ismael Valverde, who being by me here and now duly sworn, upon oath says:

"I, (name) Juan Ismael Valverde of NUECES County, Texas, being a candidate for the office of CONSTABLE, PRECINCT ONE, swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other official action. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code.

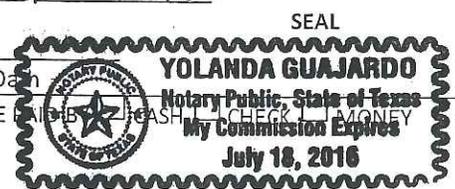
I further swear that the foregoing statements included in my application are in all things true and correct."

X Juan I. Valverde
 SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at Corpus Christi, Tx this the 12 day of November 2015.

Yolanda Guajardo
 Signature of Officer Administering Oath²

Notary
 Title of Officer Administering Oath



TO BE COMPLETED BY CHAIR: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE PAID BY CASH, CHECK, OR MONEY ORDER, CASHIERS CHECK, OR PETITION IN LIEU OF FILING FEE.

This document and \$ _____ filing fee or a nominating petition of _____ is pages received.

(See Section 1.007)

Voter Registration Status Verified

 Date Received

 Signature of Chair

Account # 8594-1564-4789

Order Details | Order # 3WVFM-K3A93-0Q3

Order Date: 11/8/2015 7:31 PM

Estimated Date of Arrival: 11/20/2015

Order Status: **Partial Shipment****Shipping Address**

Juan Valverde
221 Tropical Lane
Corpus Christi, 78408
United States of America
3618828996

Billing Address

Juan Valverde
221 Tropical Lane
Corpus Christi, 78408
United States of America
3618828996

Delivery Speed

Economy

Payment Information

****2509

Exp. 10/2016

Order Total

Product Total	\$354.99
Shipping & Processing Economy - Est. Arrival Nov 20	\$12.99
You Paid:	\$367.98

Reorder**Car Door Magnets - Large**

Car Door Magnet - Large

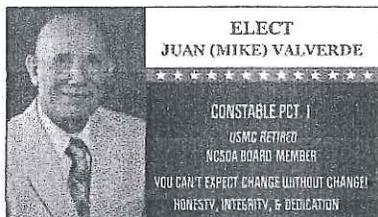
Status: **Shipped**

Track: 1Z7R44E20371847201

Carrier: UPS Ground

Qty 6

Base Price \$120.00

Item Total **\$120.00****Standard Business Cards**

Standard Business Card

Status: **Shipped**

Track: 1Z7R44E20371847201

Carrier: UPS Ground

Qty 1500

Base Price	\$60.00 \$29.99
Blank Back Side	INCLUDED
Glossy	INCLUDED
Item Total	\$29.99



Large Door Hangers

Large Door Hanger

Status: Cancelled

Qty 2000

Base Price	\$205.00
Blank Backside	INCLUDED
Item Total	\$205.00

NCE CREDIT UNION
701 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

12/02/15-03:04 PM
Tran#: 00215
Tr#: 005-adv
Doc#: 00020

Member 663755
JUAN VALVERDE
CAMPAIN
221 TROPICAL LANE
CORPUS CHRISTI TX 78408

Receipts

Acct Id: -00

Share W/D-Cash	250.00
Excess Number of MD's Fee	3.00
New Balance	694.00

Receipt Recap:

Cash Disbursed	250.00
----------------	--------

Signature: Juan L. Valverde

NCE CREDIT UNION
901 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

11/04/15-09:53 AM
Tran#: 00113
Tr#: 002-rac
Doc#: 00008

Member 663755
JUAN VALVERDE
CAMPAIN
221 TROPICAL LANE
CORPUS CHRISTI TX 78408

Receipts

Acct Id: -00

Share Withdrawal	3,000.00
New Balance	2,000.00

Receipt Recap:

Cash Disbursed	3,000.00
----------------	----------

Signature: Juan L. Valverde

NCE CREDIT UNION
901 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

11/24/15-09:56 AM
Tran#: 00128
Tr#: 005-adv
Doc#: 00004

Member 663756
JUAN VALVERDE
CAMPAIGN
221 TROPICAL LANE
CORPUS CHRISTI TX 78408

Receipts

Acct Id: -00

Share W/D-Cash	2,050.00
Excess Number of WD's Fee	3.00-
New Balance	947.00

Receipt Recap:

Cash Disbursed	2,050.00
----------------	----------

Signature: Juan Valverde

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

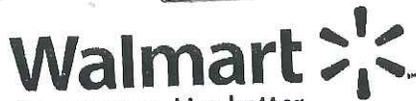
EXPENDITURE CATEGORIES FOR BOX 8(a)

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
	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 G: <i>2 of 4</i>	2 FILER NAME <i>JUAN I. VALVERDE</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/06/15</i>	5 Payee name <i>WALMART</i>	
6 Amount (\$) <i>13.68</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>1821 S. PADRE ISLAND DR., CC, TX 78416</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>OFFICE OVERHEAD EXPENSE CAMPAIGN OFFICE SUPPLIES</i>	(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 <i>JUAN I. VALVERDE</i>	Office sought / Office held <i>CONSTABLE PRECINCT 1</i>
Date <i>12/07/15</i>	Payee name <i>DR. HECTOR P. GARCIA MAIN POST OFFICE</i>	
Amount (\$) <i>28.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>809 NUECES BAY BLVD., CC, TX 78408</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>POST OFFICE BOX CAMPAIGN MAIL SERVICES</i>	(b) 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 <i>JUAN I. VALVERDE</i>	Office sought / Office held <i>CONSTABLE PRECINCT 1</i>
Date <i>12/07/15</i>	Payee name <i>MAGIC 104.9 FM CARLOS LOPEZ</i>	
Amount (\$) <i>500.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>P.O. BOX 270547, CC, TX 78427</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>RADIO/TV SERVICE ADVERTISING EXPENSE</i>	(b) 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 <i>JUAN I. VALVERDE</i>	Office sought / Office held <i>CONSTABLE PRECINCT 1</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



Save money. Live better.

(361) 854 - 0943
 MANAGER BRYAN BOOTH
 1821 S PADRE ISLAND DR
 CORPUS CHRISTI TX 78416
 ST# 00470 DP# 000195 TE# 73 TR# 07800
 RECEIPT BOOK 008795821182 8.67 X
 7PKT EXP FIL 695803740900 3.97 X
 SUBTOTAL 12.64
 TAX 1 8.250 % 1.04
 TOTAL 13.68
 DEBIT TEND 13.68
 CHANGE DUE 0.00

EFT DEBIT PAY FROM PRIMARY
 13.68 TOTAL PURCHASE
 ACCOUNT # **** * 9511 S
 REF # 534000762592
 NETWORK ID. 0056 APPR CODE 795451
 TERMINAL # SC010181

12/06/15 11:11:31

ITEMS SOLD 2

TC# 6680 0925 5819 5328 20



Low Prices You Can Trust. Every Day.
 12/06/15 11:11:34

Savings Catcher! Scan with Walmart app



VERONICA L. VALVERDE

P.O. Box 9435
CC, TX 78469

DR HECTOR P GARCIA MAIN POST O
CORPUS CHRISTI, Texas
784699995
4879830409-0097
12/07/2015 (888)275-8777 11:06:15 AM

Sales Receipt

Product Description	Sale Unit Qty	Unit Price	Final Price
New PO Box			\$28.00
Customer Number:			
Box Size:	1		
Name:	VALVERDE, VERONICA		
Box/Call Number:	9435 CORPUS CHRISTI, TX 78469		
Period:	Semi-annual (6 months) (12/07/2015 - 05/31/2016)		
Visit ID: 127404336			
Key Deposit	2		\$0.00
Keys Issued	2		
Serial Number:	78354		
Total:			\$28.00

Paid by:
Debit Card \$28.00
Account #: XXXXXXXXXXXX9511
Approval #: 103869
Transaction #: 127
23903480986
Receipt#: 001266

Order stamps at usps.com/shop or
call 1-800-Stamp24. Go to
usps.com/clicknship to print
shipping labels with postage. For
other information call
1-800-ASK-USPS.

Get your mail when and where you
want it with a secure Post Office
Box. Sign up for a box online at
usps.com/poboxes.

Bill#:1000302470728
Clerk:07

All sales final on ~~stamps~~ and postage
Refunds for guaranteed services only
Thank you for your business



NO. 00296

P.O. Box 270547
 Corpus Christi, Texas 78427
 (361) 289-8877
 Email:
 carloslopezmagic@yahoo.com

Salesman Carlos Lopez Date 12-3-15
 Advertiser Juan Valverde Condalitz Price
 Address Corpus Christi Mgr. X Juan Valverde
 Product Politic LPR Starting Date _____
 Approved By: _____

Announcements

Live Length 7-8 Tape

Program LA VOZ Abel Alonzo Show

Length 130 Studio _____ Remote _____

Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat
Jan 5th	4	5 7-8	6	7	TU 8	\$2
week of Feb 23	22	23 7-8	24	25	TU 26	\$1
			Ch No # 682			

Total No. Times 20x Expiration Date 1-

Rates: for _____ Broadcasts:

Net Station Time	Talent	Live Service	Other Cl
\$	\$	\$	\$
Total Per Broadcast:			For Contract

MAJIC 1079

Wells Fargo Bank
Transaction Receipt

NCE CREDIT UNION
901 LEOPARD SUITE 114
CORPUS CHRISTI TX 78401
NCE CREDIT UNION

12/07/15-02:27 PM
Tran#: 00929
Tr#: 004-bgg
Doc#: 00029

Member 663755
JUAN VALVERDE
CAMPAIGN
221 TROPICAL LANE
CORPUS CHRISTI TX 78408

Receipts

Acct Id: -00

Share W/O-Cash	500.00
Excess Number of WD's Fee	3.00-
New Balance	191.00

Receipt Recap:

Cash Disbursed	500.00
----------------	--------

Signature: *Juan Valverde*

Store #0004684 3

Deposit

Account Number	XXXXXXXX8832
CHK 00808	
Cash In	\$500.00
Total Deposit	\$500.00

Deposit will be available:

Date	Amount
12/07/2015	\$500.00

Transaction # 081 0104
04:12PM 12/07/15
Deposit Credit Date: 12/07/15

TIP: You can order and review your free credit report at least once a year to ensure all reported payment history and account records remain accurate at annualcreditreport.com

Thank you, JANET

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 |
| | 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 G: 3 of 4	2 FILER NAME JUAN I. VALVERDE	3 Filer ID (Ethics Commission Filers)
--	---	---------------------------------------

4 Date 12/08/15	5 Payee name DISCOUNT RUBBER STAMPS
---------------------------	---

6 Amount (\$) 19.93 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. BOX 445, BUTLER, WI. 53007-0445
--	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) OFFICE OVERHEAD EXPENSE CAMPAIGN OFFICE SUPPLIES	(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 JUAN I. VALVERDE	Office sought CONSTABLE PRECINCT 1	Office held
--	--	--	-------------

Date 12/21/15	Payee name QUINTA CAPORALES MEAT MARKET
-------------------------	---

Amount (\$) 360.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3002 S. PORT AVE, CC, TX 78405
---	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BBQ BENEFIT (FOOD) FUNDRAISING 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
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name JUAN I. VALVERDE	Office sought CONSTABLE PRECINCT 1	Office held
--	--	--	-------------

Date 12/21/15	Payee name KEVIN KIESCHNICK TAX ASSESSOR NUECES COUNTY
-------------------------	--

Amount (\$) 30.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 901 LEOPARD ST. RM 301, CC, TX 78401
--	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) VOTERS LIST (DISC) OTHER CAMPAIGN 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
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name JUAN I. VALVERDE	Office sought CONSTABLE PRECINCT 1	Office held
--	--	--	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Subject: Receipt for Your Payment to discourubberstamps.com

From: service@paypal.com (service@paypal.com)

To: roni665@yahoo.com;

Date: Tuesday, December 8, 2015 7:40 PM



Dec 8, 2015 17:38:44 PST
Transaction ID: 1AT61469UU9198201

Hello veronica valverde,

You sent a payment of \$19.93 USD to discourubberstamps.com
(paypal@discounrubberstamps.com)

It may take a few moments for this transaction to appear in your account.

Merchant

discounrubberstamps.com
paypal@discounrubberstamps.com
414-443-5402

Instructions to merchant

You haven't entered any instructions.

Shipping address - confirmed

veronica valverde
221 Tropical LN
Corpus Christi, TX 78408
United States

Shipping details

The seller hasn't provided any shipping details yet.

Get a credit decision in seconds.

PayPal Extras MasterCard.
PayPal Smart Connect Accounts.



Description	Unit price	Qty	Amount
	\$19.93 USD	1	\$19.93 USD
		Subtotal	\$19.93 USD
		Total	\$19.93 USD
		Payment	\$19.93 USD

RUBBER STAMPS

Payment sent to paypal@discounrubberstamps.com

Issues with this transaction?

You have 180 days from the date of the transaction to open a dispute in the Resolution Center.

? Questions? Go to the Help Center at www.paypal.com/help.

For assistance with matters regarding your PayPal account not identified above, please contact us toll free at 1-

**Quinta Caporales
Meat Market**

3002 South Port Ave
Corpus Christi, TX 79405
Phone # 361-887-6644

028723

CUSTOMER'S ORDER NO.		DEPARTMENT	DATE
NAME VERONICA VALVERDE			12/21/15
ADDRESS			
CITY, STATE, ZIP (361) 737 2091			
SOLD BY	CASH	C.O.D.	CHARGE
			ON. ACCT. MDSE. RETD. PAID OUT

Misc Meat 360.00 F
SUBTOTAL \$360.00
TOTAL \$360.00
OL CHARGE \$360.00
CHANGE \$.00

B PTS EARNED: 360
ITEMS PURCHASED: 1

Gracias!

Thank you for your support!
ERIKA FLORES
ST#00010101 RG#001 TR#47521 CH#ERIK
08:59 AM 12/21/15



QUANTITY	DESCRIPTION	PRICE	AMOUNT
1			
2	20 CAJAS DE LEG 1/4		
3			
4	20 x 1800	\$360.00	
5			
6			
7			
8			
9	20/ febrero / 2016		
10			
11			
12			
13			
14			
15			
16	Erika Cashier		
17			
18			



RECEIVED BY

A-5805 T-46320/46350 **KEEP THIS SLIP FOR REFERENCE** 01-11

Quinta Caporales Meat Market
3002 S. Port Ave.
Corpus Christi, Tx. 784
361-887-6644

12/21/2015 10:14:05
Merchant ID: XXXXXXXXXXXX8246
Device ID: 1027
Terminal ID: PD141.

DEBIT CARD
DEBIT SALE
CARD # XXXXXXXXXXXX9511
Debit Card Type 015
Debit Network INTERLINK
TRANS # 996
Batch #: 5
Approval Code: 581993
Entry Method: Swiped
Mode: Online

SALE AMOUNT \$360.00

THANK YOU
CUSTOMER COPY

KEVIN KIESCHNICK
TAX ASSESSOR AND COLLECTOR
NUECES COUNTY

TEMPORARY RECEIPT

DATE Dec 21 46604 2015



Instructions:
1. Original to payor
2. First copy to bookkeeper
3. Second copy remains in book.
4. Do not erase. If an error is made,
void the receipt leaving original in
book.

RECEIVED OF Veronica Valverde \$ 30.00

ADDRESS _____ DOLLARS

ACCOUNT NO.: Reg voters for Constable pct 1

KEY NO.: _____

Cash _____
Check \$ 2558
Money Order _____
Rodriguez

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 |
| | 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 G: <i>4 of 4</i>	2 FILER NAME <i>JUAN I. VALVERDE</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12/30/15</i>	5 Payee name <i>TOP QUALITY GRAPHICS</i>	
6 Amount (\$) <i>1,152.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>4531 AYERS ST, STE 308, CC, TX 78415</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>SIGNS (YARDS & LARGE) PRINTING EXPENSE</i>	(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 <i>JUAN I. VALVERDE</i>	Office sought / Office held <i>CONSTABLE PRECINCT 1</i>
Date <i>01/05/16</i>	Payee name <i>VISTA PRINT NETHERLANDS B.V.</i>	
Amount (\$) <i>36.98</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>275 WYMAN ST., WALTHAM, MA. 02451</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>BUSINESS CARDS CAMPAIGN PRINTING EXPENSE</i>	(b) 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 <i>JUAN I. VALVERDE</i>	Office sought / Office held <i>CONSTABLE PRECINCT 1</i>
Date <i>01/13/16</i>	Payee name <i>VISTA PRINT NETHERLANDS B.V.</i>	
Amount (\$) <i>216.99</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>275 WYMAN ST., WALTHAM, MA. 02451</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>DOOR HANGERS PRINTING EXPENSE</i>	(b) 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



INVOICE

9700

THE QUALITY SHOP ABOVE THE REST
 4531 Ayers St. Ste 308 361-851-8346
 Corpus Christi, Texas 78415 Juan Leal

S	JUAN MIKE VALVERDE	S	
O		H	
L		I	
D		P	
T		T	
O		O	

DATE 1/2/16	SHIPPED	TERMS	SALESMAN	CUSTOMER ORDER NO.
----------------	---------	-------	----------	--------------------

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
10	4x4 SILNS	65	650
25	18x24 YARD SILNS	15	375
25	STANDS	14	350

TOP QUALITY TINT AND GRAPHICS
 4531 AYERS ST. STE 308
 CORPUS CHRISTI, TX 78415
 361 851 8346
 2102011413202

Sale

Exp: XX-XX
 Entry Method: Swiped
 Total: \$ 1,152.00
 12/30/15 15:18:55
 Invtl: 000001 Appr Code: 030940
 Apprtd: Online Batch#: 000946
 TRN Ref #: 385364767351716
 Validation Code: XSBT
 Rewards Program: 857383

THANK YOU!
 PLEASE LOVE AGAIN!
 GARDEN FOR COPY
 RETAIN THIS COPY FOR STATEMENT VERIFICATION

<i>Juan I. Valverde</i>				
PLEASE PRINT YOUR NAME HERE				
Juan I. Valverde	SALES TAX			
	TOTAL	41,067		

11,157

Subject: Receipt for Your Payment to Vistaprint Netherlands B.V.

From: service@paypal.com (service@paypal.com)

To: roni665@yahoo.com;

Date: Tuesday, January 5, 2016 10:31 PM



Jan 5, 2016 20:30:31 PST
Transaction ID: 6AT735938G019674F

Hello veronica valverde,

**You sent a payment of \$36.98 USD to Vistaprint Netherlands B.V.
(customerservice@vistaprint.com)**

It may take a few moments for this transaction to appear in your account.

Merchant

Vistaprint Netherlands B.V.
customerservice@vistaprint.com
866-893-6743

Instructions to merchant

You haven't entered any instructions.

Get a credit decision in seconds.

PayPal Extras MasterCard®.
PayPal Smart Connect Accounts.

[Learn More](#)

Description	Unit price	Qty	Amount
	\$36.98 USD	1	\$36.98 USD
		Subtotal	\$36.98 USD
		Total	\$36.98 USD
		Payment	\$36.98 USD

Payment sent to customerservice@vistaprint.com

Invoice ID: Q8HKC-N3A56-0Q2

BUSINESS CARDS

Issues with this transaction?

You have 180 days from the date of the transaction to open a dispute in the Resolution Center.

? Questions? Go to the Help Center at www.paypal.com/help.

For assistance with matters regarding your PayPal account not identified above, please contact us toll free at 1-888-221-1161.

Subject: Receipt for Your Payment to Vistaprint Netherlands B.V.
From: service@paypal.com (service@paypal.com)
To: roni665@yahoo.com;
Date: Wednesday, January 13, 2016 8:11 AM



Jan 13, 2016 06:10:36 PST
 Transaction ID: 6HA226082R5197531

Hello veronica valverde,

You sent a payment of \$216.99 USD to Vistaprint Netherlands B.V.
 (customerservice@vistaprint.com)

It may take a few moments for this transaction to appear in your account.

Merchant
 Vistaprint Netherlands B.V.
 customerservice@vistaprint.com

Instructions to merchant
 You haven't entered any instructions.

Get a credit decision in seconds.

PayPal Extras MasterCardSM.
 PayPal Smart Connect Accounts.

[Learn More](#)

Description	Unit price	Qty	Amount
	\$216.99 USD	1	\$216.99 USD
		Subtotal	\$216.99 USD
		Total	\$216.99 USD
		Payment	\$216.99 USD

Payment sent to customerservice@vistaprint.com

Issues with this transaction?

You have 180 days from the date of the transaction to open a dispute in the Resolution Center.

? Questions? Go to the Help Center at www.paypal.com/help.

DOOR HANGERS

For assistance with matters regarding your PayPal account not identified above, please contact us toll free at 1-888-221-1161.