



# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

14 C/OH NAME

SERGIO L. DE LEON

15 ACCOUNT # (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.

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

FILED  
TARRANT COUNTY  
2014 FEB - 3 AM 11:53  
STEVE JACOBSON  
ELECTIONS ADMINISTRATOR  
BY:

additional pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 1,325.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 6,973.23

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 10,141.40

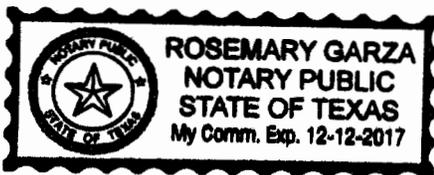
OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

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

S. L. De Leon  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said SERGIO L. DE LEON, this the 3RD day of FEBRUARY, 2014, to certify which, witness my hand and seal of office.

Rosemary Garza  
Signature of officer administering oath

ROSEMARY GARZA  
Print name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): <b>2</b> <b>1 + 2</b>	
2 FILER NAME <b>SERGIO L. DE LEON</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>01/3/14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joan Kline</b>	7 Amount of contribution (\$) <b>50.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>1215 Elizabeth Blvd Fort Worth, Tx 76110</b>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <b>Real Estate</b>		10 Contributor's job title <b>Realtor</b>	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date <b>01/14/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jeff S. Hoover</b>	Amount of contribution (\$) <b>200.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>800 W. Weatherford St. Fort Worth, Tx 76102</b>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <b>Attorney at law</b>		Contributor's job title <b>Attorney</b>	
Contributor's employer/law firm <b>Law Office of Jeff S. Hoover</b>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date <b>01/15/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Francisco Hernandez, Jr.</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>800 W. Weatherford St. Fort Worth, Tx 76102</b>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <b>Attorney at law</b>		Contributor's job title <b>Attorney</b>	
Contributor's employer/law firm <b>Hernandez Law Firm</b>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

FILED  
 TARRANT COUNTY  
 2014 FEB -3 AM 11:43  
 STEVE HADSON  
 ELECTIONS ADMINISTRATOR

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A(J): <b>2 of 2</b>
---	---

2 FILER NAME <b>SERGIO L. DE LEON</b>	3 ACCOUNT # (Ethics Commission Filers)
--	--

4 Date <b>01/15/14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Harris Automotive</b>	7 Amount of contribution (\$) <b>25.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>3248 W. Seminary Drive Fort Worth, TX 76133</b>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation <b>Automotive</b>	10 Contributor's job title <b>Owner</b>
---	--

11 Contributor's employer/law firm	12 Law firm of contributor's spouse (if any)
------------------------------------	--

13 If contributor is a child, law firm of parent(s) (if any)

Date <b>01/21/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Brent C. Morton</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>3808 Hollow Creek Rd. Fort Worth, TX 76114</b>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation <b>Chick-FilA</b>	Contributor's job title <b>Manager</b>
---	---

Contributor's employer/law firm	Law firm of contributor's spouse (if any)
---------------------------------	---

If contributor is a child, law firm of parent(s) (if any)

Date <b>01/23/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Hector C. Cortez</b>	Amount of contribution (\$) <b>50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>2722 S. Jennings Ave. Fort Worth, TX 76110</b>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation	Contributor's job title
------------------------------------	-------------------------

Contributor's employer/law firm	Law firm of contributor's spouse (if any)
---------------------------------	---

If contributor is a child, law firm of parent(s) (if any)

FILED  
 TARRANT COUNTY  
 2014 FEB -3 AM 11:53  
 SEVEN ELECTIONS ADMINISTRATOR

**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

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>3</b> <b>1 of 3</b>	2 FILER NAME <b>SERGIO L. DE LEON</b>	3 ACCOUNT # (Ethics Commission Filers)
---	--	--

4 Date <b>01/01/2014</b>	5 Payee name <b>Booker Industries</b>
-----------------------------	--

6 Amount (\$) <b>108.25</b>	7 Payee address; City; State; Zip Code <b>2344 Fawington Dallas, Tx 75207</b>
--------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Data</b>
--------------------------	---	--

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

Date <b>01/01/2014</b>	Payee name <b>AT + T</b>
---------------------------	-----------------------------

Amount (\$) <b>154.29</b>	Payee address; City; State; Zip Code <b>P.O. Box 537104 Atlanta, GA 30353</b>
------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>office expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>cell phone</b>
------------------------	---	--

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

Date <b>01/07/14</b>	Payee name <b>Edwards &amp; Betterson Signs</b>
-------------------------	--

Amount (\$) <b>1,759.00</b>	Payee address; City; State; Zip Code <b>4732 Don Drive Dallas, Tx</b>
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Signs</b>
------------------------	---	---

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

Date <b>01/09/14</b>	Payee name <b>Fort Worth Hispanic Chamber</b>
-------------------------	--

Amount (\$) <b>120.00</b>	Payee address; City; State; Zip Code <b>1327 N. Main St. Fort Worth, TX 76104</b>
------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Tickets</b>
------------------------	--	---

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

FILED  
 STARBUCKS  
 214 FEB -3 AM 11:53  
 STATE AGENCY  
 ELECTIONS ADMINISTRATOR  
 BY:

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>2 of 3</b>		2 FILER NAME <b>SERGIO L. DE LEON</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>01-11-14</b>		5 Payee name <b>Home Depot</b>			
6 Amount (\$) <b>109.<sup>00</sup></b>		7 Payee address; City; State; Zip Code <b>133 Sycamore School Rd, Fort Worth, Tx 76134</b>			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Post for 4x8 signs</b>		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name		Office sought <b>Office held</b>		
Date <b>01-14-14</b>		Payee name <b>Juan Martinez</b>			
Amount (\$) <b>75.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>1419 W. Berry St. Fort Worth, TX 76110</b>			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Donation</b>		Description (If travel outside of Texas, complete Schedule T)		
	Candidate / Officeholder name		Office sought <b>Office held</b>		
Date <b>01-21-14</b>		Payee name <b>Booker Industries</b>			
Amount (\$) <b>164.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>2344 Farrington Dallas, Tx 75207</b>			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>Office</b>		
	Candidate / Officeholder name		Office sought <b>Office held</b>		
Date <b>01-21-14</b>		Payee name <b>Federacion Zacatecana</b>			
Amount (\$) <b>100.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>4323 E. Lancaster Fort Worth, Tx 76103</b>			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Event Expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>Tickets</b>		
	Candidate / Officeholder name		Office sought <b>Office held</b>		

FILED  
 TARRANT COUNTY  
 2014 FEB 3 AM 11:53  
 STEVEN MADSON  
 ELECTIONS ADMINISTRATOR  
 BY:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>3 of 3</b>	2 FILER NAME <b>SERGIO L. DE LEON</b>	3 ACCOUNT # (Ethics Commission Filers)
--	--	--

4 Date <b>01-22-14</b>	5 Payee name <b>AT &amp; T</b>
---------------------------	-----------------------------------

6 Amount (\$) <b>166.13</b>	7 Payee address; City; State; Zip Code <b>P.O. Box 537104 Atlanta, GA 30353</b>
--------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>office expense</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>cell phone</b>
--------------------------	---	--

9 Complete ONLY if direct expenditure to benefit COH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date <b>01-23-14</b>	Payee name <b>Painter Communications</b>
-------------------------	---

Amount (\$) <b>4017.50</b>	Payee address; City; State; Zip Code <b>75 Maple St., Ste 203 Conshohocken, PA 19428</b>
-------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Phone banks</b>
------------------------	--	---

Complete ONLY if direct expenditure to benefit COH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date <b>01-23-14</b>	Payee name <b>Edwards + Patterson Signs</b>
-------------------------	--

Amount (\$) <b>200.02</b>	Payee address; City; State; Zip Code <b>4733 Don Drive Dallas, TX</b>
------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Frames for signs</b>
------------------------	--	--

Complete ONLY if direct expenditure to benefit COH	Candidate / Officeholder name	Office sought	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 (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit COH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

FILED  
 TARRANT COUNTY  
 2014 FEB - 03 AM 11:53  
 STEVE M. BOGARD  
 ELECTIONS ADMINISTRATOR  
 BY: