

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: FILED FOR RECORD														
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="checkbox"/> FIRST MI Mr. Mark Werner NICKNAME LAST SUFFIX	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 5px;">AT OFFICE USE ONLY</td> <td style="width:50%; padding: 5px;">MI</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Date Received JAN 15 2014</td> </tr> <tr> <td colspan="2" style="padding: 5px;">DIANA T. BARRERA Clerk, County Court, Nueces County, Texas By <i>[Signature]</i> Deputy</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Date Hand-delivered or Postmarked</td> </tr> <tr> <td style="padding: 5px;">Receipt #</td> <td style="padding: 5px;">Amount</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Date Processed</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Date Imaged</td> </tr> </table>		AT OFFICE USE ONLY	MI	Date Received JAN 15 2014		DIANA T. BARRERA Clerk, County Court, Nueces County, Texas By <i>[Signature]</i> Deputy		Date Hand-delivered or Postmarked		Receipt #	Amount	Date Processed		Date Imaged	
AT OFFICE USE ONLY	MI																
Date Received JAN 15 2014																	
DIANA T. BARRERA Clerk, County Court, Nueces County, Texas By <i>[Signature]</i> Deputy																	
Date Hand-delivered or Postmarked																	
Receipt #	Amount																
Date Processed																	
Date Imaged																	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 403 Waco St Corpus Christi TX 78401																
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 654-6565																
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/> FIRST MI Allen Torres NICKNAME LAST SUFFIX																
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4541 Everhart Rd #3 Corpus Christi TX 78411																
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 816-9125																
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 THROUGH Month Day Year 11 / 15 / 2013 01 / 15 / 2014																
11 ELECTION	ELECTION DATE Month Day Year 03 / 04 / 2014	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special															
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Nueces County Court at Law #4															
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	<p>DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.</p> <p>Name</p> <p>Address / PO Box Apt. / Suite #; City; State; Zip Code</p>																

GOTO PAGE 2

2014-030

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

15 C/OH NAME
Mark H. Woerner

16 ACCOUNT # (Ethics Commission Filers)

17 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

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

\$ 185.00

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

\$ 5500.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 3091.42

CONTRIBUTION BALANCE

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

\$ 22,593.58

OUTSTANDING LOAN TOTALS

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

\$ 20,000.00

19 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.

Mark H. Woerner
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said mark H. Woerner, this the 15th day of January, 20 14, to certify which, witness my hand and seal of office.

Patricia Resendez
Signature of officer administering oath

Patricia Resendez
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):

2 FILER NAME

Mark H Woerner

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/03/13

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

Ira Z. Miller

6 Contributor address; City; State; Zip Code

545 N. Upper Broadway
Corpus Christi TX 78401

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

Attorney

10 Contributor's job title

owner

11 Contributor's employer/law firm

Law Office of Ira Z. Miller

12 Law firm of contributor's spouse (if any)

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

Date

12/04/13

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

Bianca Medina

Contributor address; City; State; Zip Code

915 Kinney
Corpus Christi TX 78401

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Attorney

Contributor's job title

Associate

Contributor's employer/law firm

Law Office of Rey Martinez

Law firm of contributor's spouse (if any)

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

Date

12/04/13

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

Jack Baker

Contributor address; City; State; Zip Code

6662 S. Staples
Corpus Christi TX 78413

Amount of contribution (\$)

444.35

In-kind contribution description (if applicable)

Food for Announcement Event

(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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**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): **6**

2 FILER NAME **Mark H Woerner** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 12/04/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon Gutierrez	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5151 Flynn Parkway #504 Corpus Christi TX 78411		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

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 12/04/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James R. Edwards	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7830 Grizzly Dr Corpus Christi TX 78414		(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)

Date 12/04/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Waller	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 400 Mann St. Ste. 700 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title
owner

Contributor's employer/law firm **Law Office of Christopher Waller** 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.

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): 6	
2 FILER NAME Mark H. Woerner		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/04/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Peter Maconcellos	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 13801 Jolly Roger Corpus Christi TX 78418		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation		10 Contributor's job title	
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 12/04/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nathan Burkett	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 538 S. Taneahua Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Owner	
Contributor's employer/law firm Law Office of Nathan Burkett		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 12/04/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Susan Holley Lawe	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3721 Shaven Ct Corpus Christi TX 78414		(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)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**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): 6	
2 FILER NAME Mark H. Woerner		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/04/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kevin Barker	7 Amount of contribution (\$) 350.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5151 Flynn Parkway #504 Corpus Christi TX 78411		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation		10 Contributor's job title	
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 12/06/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joe Vollmer	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1018 Delta Dr. Corpus Christi TX 78412		(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)			

Date 12/09/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Robert Berg	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 462 Atlantic Corpus Christi TX 78404		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Owner	
Contributor's employer/law firm Law office of Robert Berg		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.

**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): **6**

2 FILER NAME **Mark H. Woerner** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 12/09/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark Flato	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code P.O. Box 1999 Corpus Christi TX 78403		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

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 12/16/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Carrigan	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 101 Shoreline Blvd Ste 420 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title
Partner

Contributor's employer/law firm **Carrigan, Cook + Anderson** Law firm of contributor's spouse (if any)

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

Date 12/16/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deanne Torres	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 500 N. Water Ste 607 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title
Owner

Contributor's employer/law firm **Law Office of Deanne Torres** 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.

**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): 6

2 FILER NAME Mark H. Woerner 3 ACCOUNT # (Ethics Commission Filers)

4 Date <u>11/03/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Roni Cruz DBA Smart Start of South Texas</u>	7 Amount of contribution (\$) <u>250.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>5146 Ayers St Corpus Christi TX 78415</u>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

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	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 (if applicable)
		(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)

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 (if applicable)
		(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)

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

LOANS (JUDICIAL)

SCHEDULE E (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): 1
2 FILER NAME Mark H. Woerner		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨		\$
5 Date of loan 12/23/13	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark H Woerner	9 Loan Amount (\$) \$20,000.00
6 Is lender a financial institution? Y <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Lender's Principal Occupation Attorney		13 Lender's Job Title OWNER
14 Lender's Employer/Law Firm Law Office of Mark H. Woerner		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		
18 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	19 Name of guarantor 20 Guarantor address; City; State; Zip Code	21 Amount Guaranteed (\$)
22 Guarantor's Principal Occupation		23 Guarantor's Job Title
24 Guarantor's Employer/Law Firm		25 Law Firm of guarantor's spouse (if any)
26 If guarantor is child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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:	2 FILER NAME Mark H Woerner	3 ACCOUNT # (Ethics Commission Filers)
---------------------------	---------------------------------------	--

4 Date 12/11/13	5 Payee name Jeff Butler
---------------------------	------------------------------------

6 Amount (\$) 1250.00	7 Payee address; City; State; Zip Code 722 Chase Corpus Christi TX 78412
---------------------------------	--

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

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

Date 12/20/13	Payee name Janel Benavides
-------------------------	--------------------------------------

Amount (\$) 270.63	Payee address; City; State; Zip Code 7418 Lake Como Corpus Christi TX 78413
------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Photography
------------------------	--	---

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

Date 01/03/14	Payee name Jeff Butler
-------------------------	----------------------------------

Amount (\$)	Payee address; City; State; Zip Code 722 Chase Corpus Christi TX 78412
-------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Political Consultant
------------------------	---	--

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G:	2 FILER NAME Mark H. Woerner	3 ACCOUNT # (Ethics Commission Filers)
---------------------------	--	--

4 Date 11/5/13	5 Payee name Nueces County Republican Party
--------------------------	---

6 Amount (\$) 1500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4639 Corona Dr Corpus Christi TX 78411
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fee	(b) Description (If travel outside of Texas, complete Schedule T) Filing Fee
--------------------------	--	--

Date 01/11/14	Payee name Dollar Rent A Car
-------------------------	--

Amount (\$) 1777.33 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1000 International Drive Corpus Christi TX 78406
---	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Rental Car for Parade
------------------------	--	---

Date 01/11/14	Payee name Sam's Club
-------------------------	---------------------------------

Amount (\$) \$143.46 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4833 S. Padre Island Dr. Corpus Christi TX 78411
---	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) Candy for Parade
------------------------	--	--

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)
------------------------	--	---

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:

2 FILER NAME

Mark H. Woerner

3 ACCOUNT # (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender

Mark H. Woerner

5 Lender address; City; State; Zip Code

403 Waco Corps Christi TX 78401

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED