

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

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

additional pages

17 CONTRIBUTION
TOTALS

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

\$ 190.00

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

\$ 7708.60
~~1300~~

EXPENDITURE
TOTALS

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

\$ 468.09

4. TOTAL POLITICAL EXPENDITURES

\$ 7516.52

CONTRIBUTION
BALANCE

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

\$

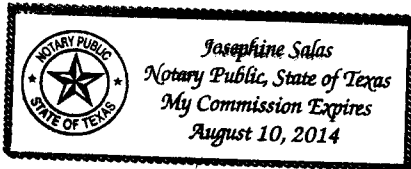
OUTSTANDING
LOAN TOTALS

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

\$ 6,000

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.



Danny Garcia

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said DANNY GARCIA, this the 30th day of APRIL, 20 12, to certify which, witness my hand and seal of office.

Josephine Salas

Signature of officer administering oath

Josephine Salas

Printed name of officer administering oath

Notary

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 4 ~~5~~ ~~6~~ ~~7~~ ~~8~~ ~~9~~ ~~10~~ ~~11~~ ~~12~~ ~~13~~ ~~14~~ ~~15~~ ~~16~~ ~~17~~ ~~18~~ ~~19~~ ~~20~~ ~~21~~ ~~22~~ ~~23~~ ~~24~~ ~~25~~ ~~26~~ ~~27~~ ~~28~~ ~~29~~ ~~30~~ ~~31~~ ~~32~~ ~~33~~ ~~34~~ ~~35~~ ~~36~~ ~~37~~ ~~38~~ ~~39~~ ~~40~~ ~~41~~ ~~42~~ ~~43~~ ~~44~~ ~~45~~ ~~46~~ ~~47~~ ~~48~~ ~~49~~ ~~50~~

2 FILER NAME

Daniel Garcia Jr

3 ACCOUNT # (Ethics Commission Filers)

4 Date

2/05/12

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

Phillip Garcia

6 Contributor address; City; State; Zip Code

Bloomington TX 77951

7 Amount of contribution (\$)

100⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/01/12

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

Lupe & Mary Ann Rivera

Contributor address; City; State; Zip Code

Placedo, TX 77997

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/01/12

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

David & Kathy Escalante

Contributor address; City; State; Zip Code

Bloomington, TX. 77951

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/05/12

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

Dr. & Mrs. Irene Ramas

Contributor address; City; State; Zip Code

*Kelian Court
San Antonio, TX.*

Amount of contribution (\$)

300⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/12

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

Jo Ann Nichols

Contributor address; City; State; Zip Code

Katy, TX

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 4 ~~3 or 4~~

2 FILER NAME

Daniel Garcia Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

2/05/12

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

Ricardo & Andreeana Martinez

6 Contributor address: City: State: Zip Code

Bloomington, TX 77951

7 Amount of contribution (\$)

100⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/12/12

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

Nick & Amelia Hinojosa

Contributor address: City: State: Zip Code

Woodlawn Victoria, TX 77901

Amount of contribution (\$)

50⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/12

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

Joe Lopez

Contributor address: City: State: Zip Code

Placedo, TX 77977

Amount of contribution (\$)

60⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/05/12

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

Ramon & Juan Martinez

Contributor address: City: State: Zip Code

Bloomington TX, 77951

Amount of contribution (\$)

30⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/05/12

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

JR & Crystal Pena

Contributor address: City: State: Zip Code

Bloomington, TX 77951

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

4

~~3~~ *5

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date

2/04/12

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

Michael Gonzales

7 Amount of contribution (\$)

100⁰⁰

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

916 Belvue Victoria, TX. 77901

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/05/12

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

April & David Macias

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

San Antonio, TX.

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/19/2012

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

Christy & Gary Parencia

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Placedo, TX 77477

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/2012

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

Arnold & Erin Gonzales

Amount of contribution (\$)

50⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Round Rock, TX

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/2012

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

Scott & Margaret Stark Johnson

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Austin, TX.

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4 4 of 4	
2 FILER NAME Daniel Garcia Jr		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 02/12/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campaign Fundraiser	7 Amount of contribution (\$) 6143.60	8 In-kind contribution description (if applicable) Fundraiser total - expenses
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/13/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander Arredondo	Amount of contribution (\$) 7500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 1442 Placedo TX 77977		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

POLITICAL EXPENDITURES

SCHEDULE F

1 of 3

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 <i>Daniel Garcia Jr</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/23/2012</i>		5 Payee name <i>J-CAT Printing</i>			
6 Amount (\$) <i>580.23</i>		7 Payee address; City; State; Zip Code <i>3602 Houston Hwy Ste D, Victoria, TX. 77901</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Printing (shirts)</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
4 Date <i>1/24/2012</i>		5 Payee name <i>Buildesign</i>			
6 Amount (\$) <i>159.70</i>		7 Payee address; City; State; Zip Code <i>11525 B Stone Hollow suite 220 Austin, TX. 78758</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Printing/Advertising expense</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
4 Date <i>1/26/2012</i>		5 Payee name <i>Sam's Club Hospitality mints</i>			
6 Amount (\$) <i>337.83</i>		7 Payee address; City; State; Zip Code <i>P.O. Box 3140 Boone NC 28607</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Advertising</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
4 Date <i>2/8/2012</i>		5 Payee name <i>Logome.com</i>			
6 Amount (\$) <i>247.30</i>		7 Payee address; City; State; Zip Code <i>7950 NW 53rd St. Ste. 342 Doral, FL. 33166</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME

Daniel Garcia Jr

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

11/13

7 Name of lender

Daniel & Frances Garcia

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

9 Loan Amount (\$)

\$4,000

6 Is lender a financial institution?

Y N

8 Lender address; City; State; Zip Code

1300 Faltysek Victoria TX, 77905

10 Interest rate

0

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

none

15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION

not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

Daniel & Frances Garcia

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

Loan Amount (\$)

\$2,000

Is lender a financial institution?

Y N

Lender address; City; State; Zip Code

1300 Faltysek Victoria TX, 77905

Interest rate

0

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

Check if personal funds were deposited into political account

GUARANTOR INFORMATION

not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

2 of 3

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 <i>Daniel Garcia Jr</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>2/20/2012</i>	5 Payee name <i>Victoria Livestock Show (Gift show breed)</i>
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6 Amount (\$) <i>100⁰⁰</i>	7 Payee address; City; State; Zip Code <i>Victoria Tx, 77901</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Event expense (Advertisement)</i>	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>1/24/2012</i>	Payee name <i>Victoria Jaycee's (Booth for stock show)</i>
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Amount (\$) <i>375⁰⁰</i>	Payee address; City; State; Zip Code <i>Victoria, Tx. 77901</i>
--	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense (Advertising)</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>2/10/2012</i>	Payee name <i>Magic 95.9 Radio</i>
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Amount (\$) <i>100⁰⁰</i>	Payee address; City; State; Zip Code <i>Victoria, Tx.</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising expense (media)</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>2/24/2012</i>	Payee name <i>Skip Mozisek</i>
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Amount (\$) <i>350⁰⁰</i>	Payee address; City; State; Zip Code <i>Victoria Tx. 77901</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising expense (media)</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

3/3

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 <i>Daniel Garcia Jr</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>2/12/12</i>	5 Payee name <i>Danny Garcia Campaign for fundraiser</i>	
6 Amount (\$) <i>2238.40</i>	7 Payee address; City; State; Zip Code <i>1300 Faltysek Victoria, TX- 77901</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>(total expenses for fundraiser as whole)</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>3/29/12</i>	Payee name <i>Suddenlink mediac</i>	
Amount (\$) <i>1556.00</i>	Payee address; City; State; Zip Code <i>2903 B N. Azalea St. Victoria, TX. 77901</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising</i>	Description (If travel outside of Texas, complete Schedule T) <i>Commercials (media)</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>4/27/12</i>	Payee name <i>US Postal Service</i>	
Amount (\$) <i>737.50</i>	Payee address; City; State; Zip Code <i>Victoria TX, Main St.</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>mail out</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>4/25/12</i>	Payee name <i>Best Buy</i>	
Amount (\$) <i>734.56</i> <i>613.38</i>	Payee address; City; State; Zip Code <i>Victoria TX</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Printer / Ink</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED