

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) 00000001 | 2 PAGE # 1 of 22 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | FIRST David | MI |
| | NICKNAME | LAST Gonzales | SUFFIX III |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; | CITY; | STATE; ZIP CODE |
| | P. O. Box 1632 Brownsville, TX 78522 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | FIRST Armando | MI |
| | NICKNAME | LAST Sanchez | SUFFIX Sr. |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; | CITY; | STATE; ZIP CODE |
| 113 New Valencia Bayview, TX 78566 | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| (956) | | 455-8275 | |
| 8 REPORT TYPE | <input 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 checked="" 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) | | |
| 9 PERIOD COVERED | Month Day Year | THROUGH | Month Day Year |
| 01/01/2015 | | | 06/30/2015 |
| 10 ELECTION | ELECTION DATE Month Day Year 04/06/2018 | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special | |
| 11 OFFICE | OFFICE HELD (if any) Cameron County Court at Law District 3 | 12 OFFICE SOUGHT (if known) Cameron County Court at Law District 3 | |

| | |
|--|--------|
| OFFICE USE ONLY | |
| CAMERON COUNTY DEPARTMENT OF ELECTIONS & VOTER REGISTRATION | |
| Date Received: <i>3:55pm</i> JUL 14 2015 | |
| RECEIVED <i>Harold Sandoval</i> Date Hand-delivered or Date Postmarked | |
| Receipt # | Amount |
| Date Processed | |
| Date Imaged | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME Gonzales, David III (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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 |
| | | COMMITTEE ADDRESS |
| | | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

16 CONTRIBUTION TOTALS

| | | |
|---|----|------|
| 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 0.00 |
|---|----|------|

| | | |
|--|----|-----------|
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 13,150.00 |
|--|----|-----------|

EXPENDITURE TOTALS

| | | |
|---|----|------|
| 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 0.00 |
|---|----|------|

| | | |
|---------------------------------|----|----------|
| 4. TOTAL POLITICAL EXPENDITURES | \$ | 4,519.48 |
|---------------------------------|----|----------|

CONTRIBUTION BALANCE

| | | |
|--|----|-----------|
| 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 22,838.65 |
|--|----|-----------|

OUTSTANDING LOAN TOTALS

| | | |
|---|----|------|
| 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |
|---|----|------|

17 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.



[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said David Gonzales, III, this the 7th day of July, 20 15, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Rosa Nelly Sanchez
Print name of officer administering oath

Notary in and for the State of Texas
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 PAGE # Schedule: 1/8 Report: 3/22 | |
| 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 02/23/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armstrong, Ronald (Mr.) 6 Contributor address; City; State; Zip Code 2600 Old Alice Brownsville, TX 78521 | 7 Amount of contribution (\$) \$300.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation Lawyer | | 10 Contributor's job title Owner | |
| 11 Contributor's employer / law firm Armstrong and Associates | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/02/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) C. Frank Wood PC Contributor address; City; State; Zip Code 3505 Boca Chica Brownsville, TX 78521 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Attorney | | Contributor's job title Owner | |
| Contributor's employer / law firm Self | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 02/23/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Canales, Jesus (Mr.) Contributor address; City; State; Zip Code 845 E Harrison St B Brownsville, TX 78520 | Amount of contribution (\$) \$700.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation | | Contributor's job title Attorney | |
| Contributor's employer / law firm Self | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|---|--|---|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 2/8 Report: 4/22 | |
| 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 02/27/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crane, Randall (Mr.) 6 Contributor address; City; State; Zip Code 201 South Sam Houston San Benito, TX 78586 | 7 Amount of contribution (\$) \$500.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Contributor's principal occupation Attorney | | 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 01/02/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dennis M. Sanchez, P.C. Contributor address; City; State; Zip Code 3505 Boca Chica Brownsville, TX 78521 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Contributor's principal occupation Attorney | | Contributor's job title Owner | |
| Contributor's employer / law firm Self | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/15/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Denton, Navarro, Rocha & Bernal P.C. Contributor address; City; State; Zip Code 701 East Harrison Suite 100 Harlingen, TX 78550-9151 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 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) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|--|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 3/8 Report: 5/22 | |
| 2 FILER NAME · Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 02/04/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellis Koeneke & Ramirez 6 Contributor address; City; State; Zip Code 1101 Chicago Avenue McAllen, TX 78501 | 7 Amount of contribution (\$) \$500.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation | | 10 Contributor's job title | |
| 11 Contributor's employer / law firm 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 02/22/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Reynaldo III (Mr.) Contributor address; City; State; Zip Code 680 E St Charles Suite 600 Brownsville, TX 78520 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Attorney | | 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 02/26/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Jorge (Mr.) Contributor address; City; State; Zip Code 34 S. Coria Brownsville, TX 78520 | Amount of contribution (\$) \$2,500.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation | | Contributor's job title Owner | |
| Contributor's employer / law firm Green Law Firm | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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|--|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 4/8 Report: 6/22 | |
| 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 01/15/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herrera, Ruben (Mr.) 6 Contributor address; City; State; Zip Code 37 West Elizabeth Brownsville, TX 78520 | 7 Amount of contribution (\$) \$500.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation Attorney | | 10 Contributor's job title Owner | |
| 11 Contributor's employer / law firm Law Office of Ruben Herrera | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/16/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hinojosa, Gilberto (Mr.) Contributor address; City; State; Zip Code 504 E St. Francis Brownsville, TX 78520 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Attorney | | Contributor's job title Owner | |
| Contributor's employer / law firm Law Office of Gilberto Hinojosa and Associates PC | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/13/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Office of Micheal Trejo Contributor address; City; State; Zip Code 1192 East 9th Street Brownsville, TX 78520 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation | | Contributor's job title | |
| Contributor's employer / law firm Law Firm | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|--|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 5/8 Report: 7/22 | |
| 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 01/15/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Office of Gilberto Hinojosa and Associates PC 6 Contributor address; City; State; Zip Code 622 E St. Charles Brownsville, TX 78520 | 7 Amount of contribution (\$) \$500.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation | | 10 Contributor's job title | |
| 11 Contributor's employer / law firm Gilberto Hinojosa | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 02/26/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Office of Rigoberto Flores Contributor address; City; State; Zip Code 914 E Van Buren Brownsville, TX 78520 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Law Firm | | 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 01/22/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code Ruben Torres Blvd. Suite B-28 Brownsville, TX 78521 | Amount of contribution (\$) \$300.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation | | Contributor's job title | |
| Contributor's employer / law firm Law Firm | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|--|---|--|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 6/8 Report: 8/22 | |
| 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 02/15/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Monarrez, Carlos (Mr.) 6 Contributor address; City; State; Zip Code 2400 Calle Esplendida Brownsville, TX 78521 | 7 Amount of contribution (\$) \$250.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Contributor's principal occupation | | 10 Contributor's job title Attorney | |
| 11 Contributor's employer / law firm ValMar 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 01/21/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nunez, Richard (Mr.) Contributor address; City; State; Zip Code 144 E Price Rd. Brownsville, TX 78521 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Contributor's principal occupation Attorney | | Contributor's job title | |
| Contributor's employer / law firm Law Office of Rick Nunez | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 02/23/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliviera, Rene (Mr.) Contributor address; City; State; Zip Code 855 Price Rd Suite 22 Brownsville, TX 78520 | Amount of contribution (\$) \$1,000.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Contributor's principal occupation | | Contributor's job title Partner | |
| Contributor's employer / law firm Roerig, Oliviera and Fisher | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|--|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 7/8 Report: 9/22 | |
| 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 01/19/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Quezada Law Firm 6 Contributor address; City; State; Zip Code 3000 Central Blvd Suite 6 Brownsville, TX 78520 | 7 Amount of contribution (\$) \$500.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation | | 10 Contributor's job title | |
| 11 Contributor's employer / law firm Jesse Quezada | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/15/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ransome & Ray PC Contributor address; City; State; Zip Code 550 E Levee Brownsville, TX 78520 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation | | Contributor's job title | |
| Contributor's employer / law firm Law Firm | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 02/23/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roerig, Oliveira, & Fisher Contributor address; City; State; Zip Code 855 W. Price Ste. 9 Brownsville, TX 78520 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation | | Contributor's job title | |
| Contributor's employer / law firm LawFirm | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|---|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 8/8 Report: 10/22 | |
| 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00000001 | |
| 4 Date 01/25/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vela, Manuel (Mr.) 6 Contributor address; City; State; Zip Code 437 Jennifer Court Hartlingen, TX 78550 | 7 Amount of contribution (\$) \$500.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation | | 10 Contributor's job title CEO | |
| 11 Contributor's employer / law firm Valley Baptist Medical Center | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 01/13/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zamir, Asim (Mr.) Contributor address; City; State; Zip Code 2100 W San Marcelo, #240 Brownsville, TX 78521 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Doctor | | 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 01/27/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zayas & Hernandez Contributor address; City; State; Zip Code 3100 E. 14th St Brownsville, TX 78520 | Amount of contribution (\$) \$350.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation | | Contributor's job title | |
| Contributor's employer / law firm Law Firm | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | |
|--|--|---|
| 1 PAGE # Schedule: 1/8 Report: 11/22 | 2 FILER NAME Gonzales, David III (Mr.) | 3 ACCOUNT # (TEC filers) 00000001 |
|--|--|---|

| | |
|-----------------------------|-----------------------------------|
| 4 Date 01/23/2015 | 5 Payee name Apple Inc. |
|-----------------------------|-----------------------------------|

| | |
|---------------------------------|--|
| 6 Amount (\$) \$17.30 | 7 Payee address City; State; Zip Code 1 Infinite Loop Cupertino, CA 95014 |
|---------------------------------|--|

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|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Software |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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

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|---------------------------|---------------------------------|
| Date 01/25/2015 | Payee name Apple Inc. |
|---------------------------|---------------------------------|

| | |
|-------------------------------|--|
| Amount (\$) \$32.46 | Payee address City; State; Zip Code 1 Infinite Loop Cupertino, CA 95014 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Software Campaign |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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

| | |
|---------------------------|---|
| Date 05/10/2015 | Payee name Brownsville Herald |
|---------------------------|---|

| | |
|------------------------------|--|
| Amount (\$) \$6.99 | Payee address City; State; Zip Code 1135 E. Van Buren St. Brownsville, TX 78520 |
|------------------------------|--|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online Access to Media |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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

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|---------------------------|---|
| Date 06/04/2015 | Payee name Brownsville Herald |
|---------------------------|---|

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| Amount (\$) \$6.99 | Payee address City; State; Zip Code 1135 E. Van Buren St. Brownsville, TX 78520 |
|------------------------------|--|

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|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> online access to media |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

| | | | |
|--|--------------------------------------|-----------------------|---------------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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| POLITICAL EXPENDITURES | SCHEDULE F |
|------------------------|------------|

| | | | |
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| EXPENDITURE CATEGORIES | | | |
| Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees | Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense | Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense | Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) |
| The INSTRUCTION GUIDE explains how to complete this form. | | | |

| | | |
|---|---|--------------------------------------|
| 1 PAGE # Schedule: 2/8 Report: 12/22 | 2 FILER NAME Gonzales, David III (Mr.) | 3 ACCOUNT # (TEC filers) 00000001 |
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| | | | |
|---------------------------|--|--|--|
| 4 Date 05/01/2015 | 5 Payee name Brownsville Independent School District | | |
| 6 Amount (\$) \$200.00 | 7 Payee address City; State; Zip Code 1900 E. Price Rd Brownsville, TX 78520 | | |

| | | |
|--------------------------|---|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Teacher Appreciation Week Gifts |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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

| | | | |
|------------------------|---|--|--|
| Date 05/28/2015 | Payee name Christ the King Church | | |
| Amount (\$) \$20.00 | Payee address City; State; Zip Code 2255 Southmost Rd Brownsville, TX 78521 | | |

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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Raffle Fundraiser |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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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 04/26/2015 | Payee name El Jardin Elementary | | |
| Amount (\$) \$300.00 | Payee address City; State; Zip Code 6911 Boca Chica Brownsville, TX 78521 | | |

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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Teacher appreciation gifts |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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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 06/11/2015 | Payee name Footworks | | |
| Amount (\$) \$50.00 | Payee address City; State; Zip Code 2224 US Business 77 Harlingen, TX 78550 | | |

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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Race Fee |
| | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 3/8 Report: 13/22 | 2 FILER NAME Gonzales, David III (Mr.) | 3 ACCOUNT # (TEC filers) 00000001 |
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| 4 Date 02/27/2015 | 5 Payee name Frost Bank |
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| 6 Amount (\$) \$4.00 | 7 Payee address City; State; Zip Code 401 Congress Ave Austin, TX 78701 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Returned Check Fee <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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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 02/23/2015 | Payee name Girl Scout Troop 109 |
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| Amount (\$) \$200.00 | Payee address City; State; Zip Code 1322 E Tyler Harlingen, TX 78550 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Girl Scout Trip Sponsor <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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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 01/06/2015 | Payee name Ink Technologies llc |
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|------------------------|---|
| Amount (\$) \$34.98 | Payee address City; State; Zip Code 7600 McEwen Centerville, OH 45459 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ink for Printer <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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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 01/16/2015 | Payee name La Playa Restaurant |
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| Amount (\$) \$48.36 | Payee address City; State; Zip Code 502 S. 77 Sunshine Strip Harlingen, TX 78550 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising lunch <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 4/8 Report: 14/22 | 2 FILER NAME Gonzales, David III (Mr.) | 3 ACCOUNT # (TEC filers) 00000001 |
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| 4 Date 02/25/2015 | 5 Payee name La Playa Restaurant |
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| 6 Amount (\$) \$53.92 | 7 Payee address City; State; Zip Code 502 S. 77 Sunshine Strip Harlingen, TX 78550 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Lunch <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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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 05/29/2015 | Payee name Los Fresnos High School; |
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| Amount (\$) \$50.00 | Payee address City; State; Zip Code 907 N Arroyo Los Fresnos, TX 78566 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Program ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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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 04/01/2015 | Payee name Lotus Restaurant |
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|------------------------|---|
| Amount (\$) \$18.35 | Payee address City; State; Zip Code 2489 Boca Chica Brownsville, TX 78521 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lunch with Constituents <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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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 01/30/2015 | Payee name Luby's |
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|------------------------|---|
| Amount (\$) \$24.10 | Payee address City; State; Zip Code 2124 Boca Chica Brownsville, TX 78520 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> lunch with constituent <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|---|--|---|--|
| 1 PAGE # Schedule: 5/8 Report: 15/22 | | 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (TEC filers) 00000001 | |
| 4 Date 04/30/2015 | | 5 Payee name Luby's | | | |
| 6 Amount (\$) \$17.27 | | 7 Payee address City; State; Zip Code 2124 Boca Chica Brownsville, TX 78520 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lunch with Constituents <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 02/10/2015 | | Payee name Mid-Valley Events | | | |
| Amount (\$) \$119.08 | | Payee address City; State; Zip Code 802 Silver St. Donna, TX 78537 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Race Fee <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 02/22/2015 | | Payee name Nolita Pizza | | | |
| Amount (\$) \$15.66 | | Payee address City; State; Zip Code 814 North Expressway 77 Brownsville, TX 78521 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lunch with constituents <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 06/17/2015 | | Payee name North Brownsville Little Miss Kickball | | | |
| Amount (\$) \$60.00 | | Payee address City; State; Zip Code 821 N. Dakota Brownsville, TX 78521 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | | Description (if travel outside of Texas, complete Schedule T) <input type="checkbox"/> Kickball sponsorship <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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|--|--|--|---|---|--------------|
| 1 PAGE # Schedule: 6/8 Report: 16/22 | | 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (TEC filers) 00000001 | |
| 4 Date 05/13/2015 | 5 Payee name Perez, Laura (Ms.) | | | | |
| 6 Amount (\$) \$1,903.00 | 7 Payee address City; State; Zip Code 435 W Madison Brownsville, TX 78520 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GOTV Field Worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | | Office held: |
| Date 03/23/2015 | Payee name Pizza Hut | | | | |
| Amount (\$) \$120.83 | Payee address City; State; Zip Code 1802 W Tyler Harlingen, TX 78550 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Funeral Evelon Dale <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | | Office held: |
| Date 03/11/2015 | Payee name Rancho Viejo Resort and Country Club | | | | |
| Amount (\$) \$95.00 | Payee address City; State; Zip Code 1 Rancho Viejo Drive Rancho Viejo, TX 78575 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Shamrock Race <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | | Office held: |
| Date 03/11/2015 | Payee name South Texas Lightening Softball | | | | |
| Amount (\$) \$80.00 | Payee address City; State; Zip Code 2615 E Price Brownsville, TX 78521 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Softball Championship Sponsorship <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | | Office held: |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel in District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 7/8 Report: 17/22 | | 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (TEC filers) 00000001 | |
| 4 Date 04/27/2015 | | 5 Payee name SPI Birding Center | | | |
| 6 Amount (\$) \$5.00 | | 7 Payee address City; State; Zip Code 6801 Padre Blvd South Padre Island, TX 78597 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Charitable contribution <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 03/23/2015 | | Payee name Tip of Texas Family Outreach | | | |
| Amount (\$) \$100.00 | | Payee address City; State; Zip Code 455 E Levee St. Brownsville, TX 78520 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Gala <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/10/2015 | | Payee name U. S. Post Office | | | |
| Amount (\$) \$132.00 | | Payee address City; State; Zip Code 1001 East Elizabeth Brownsville, TX 78520 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Mailbox <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 05/10/2015 | | Payee name Valley Morning Star | | | |
| Amount (\$) \$6.99 | | Payee address City; State; Zip Code 1310 S. Commerce Street Harlingen, TX 78550 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online access to media <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 8/8 Report: 18/22 | 2 FILER NAME Gonzales, David III (Mr.) | 3 ACCOUNT # (TEC filers) 00000001 |
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| 4 Date 06/04/2015 | 5 Payee name Valley Morning Star |
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| 6 Amount (\$) \$6.99 | 7 Payee address City; State; Zip Code 1310 S. Commerce Street Harlingen, TX 78550 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> online access to media <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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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 01/06/2015 | Payee name Verizon Wireless |
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| Amount (\$) \$790.21 | Payee address City; State; Zip Code 508 Springmart Blvd Borwnsville, TX 78526 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Replacement Tablet <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
|--|-------------------------------|----------------|--------------|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name |
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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|--|--|---|--|--|--|
| 1 PAGE # Schedule: 1/8 Report: 19/22 | | 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (TEC filers) 00000001 | |
| 4 Date 04/19/2015 | | 5 Payee name American Airlines | | | |
| 6 Amount (\$) \$422.20 | | 7 Payee address City; State; Zip Code 4333 Amon Carter Fort Worth, TX 76155 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Travel Out Of District | | (b) Description (See instructions regarding type of information required.) Judicial Seminar In Washington DC | |
| Date 02/01/2015 | | Payee name Big Daddy's Burgers | | | |
| Amount (\$) \$13.34 | | Payee address City; State; Zip Code 3065 Boca Chica Blvd Brownsville, TX 78521 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) Breakfast with Staff | |
| Date 03/01/2015 | | Payee name Bob's Chop and Steakhouse | | | |
| Amount (\$) \$118.51 | | Payee address City; State; Zip Code 301 Lavaca St Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) Dinner during Seminar with Judge McDonald | |
| Date 04/22/2015 | | Payee name Kumori | | | |
| Amount (\$) \$55.90 | | Payee address City; State; Zip Code 3340 Pablo Kisel Brownsville, TX 78521 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) Staff Luncheon | |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|---|--|
| 1 PAGE # Schedule: 2/8 Report: 20/22 | | 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (TEC filers) 00000001 | |
| 4 Date 06/09/2015 | | 5 Payee name La Pampa | | | |
| 6 Amount (\$) \$19.21 | | 7 Payee address City; State; Zip Code 1655 E Ruben M Torres Brownsville, TX 78521 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description (See instructions regarding type of information required.) Staff Luncheon | |
| Date 06/09/2015 | | Payee name La Pampa | | | |
| Amount (\$) \$32.48 | | Payee address City; State; Zip Code 1655 E Ruben M Torres Brownsville, TX 78521 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) Staff luncheon | |
| Date 01/01/2015 | | Payee name Lotus Restaurant | | | |
| Amount (\$) \$26.30 | | Payee address City; State; Zip Code 2489 Boca Chica Brownsville, TX 78521 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) Lunch with Staff | |
| Date 06/01/2015 | | Payee name Merzi | | | |
| Amount (\$) \$22.40 | | Payee address City; State; Zip Code 415 7th St Washington, DC 20004 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) Lunch during Judicial Seminar | |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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|--|--|--|--|---|--|
| 1 PAGE # Schedule: 3/8 Report: 21/22 | | 2 FILER NAME Gonzales, David III (Mr.) | | 3 ACCOUNT # (TEC filers) 00000001 | |
| 4 Date 06/05/2015 | | 5 Payee name Pena, Leofredo (Mr.) | | | |
| 6 Amount (\$) \$300.00 | | 7 Payee address City; State; Zip Code 974 E. Harrison Brownsville, TX 78521 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description (See instructions regarding type of information required.) Staff and Juror Snacks | |
| Date 02/26/2015 | | Payee name Piranha Killer Sushi | | | |
| Amount (\$) \$42.08 | | Payee address City; State; Zip Code 207 San Jacinto Blvd Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) lunch during judicial seminar | |
| Date 06/02/2015 | | Payee name Roti Mediterranean | | | |
| Amount (\$) \$23.98 | | Payee address City; State; Zip Code 1747 Pennsylvania Washington, DC 20006 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description (See instructions regarding type of information required.) Dinner during Seminar | |