	CANDIDATE / OFFI			FORM JC/OH	
CAMPAIG	N FINANCE REPOR	1		COVER SHEET PG 1	
The JC/OH Instruction	Guide explains how to complete	this form 1 Filer ID		2 Total pages filed:	╡
coron mondono	Todade explains new to complete	tills form.		23	J
3 CANDIDATE / OFFICEHOLDER NAME	3 Advisoring (1997) Society (1997) Society (1997) (1997)	RST avid	МІ	OFFICE ASE ONDYELECT Date Received VOTER RECISTRATION	-
		ST Onzales III	SUFFIX	JAN 0 4 2016	4.
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SU P. O. Box 1632	JITE#; CITY;	ZIP CODE	Date Hand-delivered of Date Postmarked Receipt # Amount	-
Change of Address	Brownsville, TX 78522			Date Processed	-
				Date Imaged	1
5 CAMPAIGN TREASURER	MS / MRS / MR FIR	colet (a.)		MI	1
NAME	Mr. Arm	ando			
	NICKNAME LAS			SUFFIX	
	San	chez		S_{τ}	
CAMPAIGN TREASURER ADDRESS (Residence or Business)	113 New Va		APT / SUITE #;	STATE; ZIP CODE	
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NO 455 -	UMBER EXTENSION			
REPORT TYPE		80th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)	
PERIOD COVERED	Month Day Year 07/01/2015	THROUGH	Month Day 12/31/201	Year 5	
0 ELECTION	ELECTION DATE Month Day Year 03/02/2018	X Primary General	ELECTION TYPE Runoff Special	Other	
1 OFFICE	OFFICE HELD (if any) Statutory County Judge Place	3	12 OFFICE SOUGHT Statutory County	(if known) Judge Place 3 District Cameron	
		GO TO PAGE 2	2		
orms provided by Tex	kas Ethics Commission	www.ethics.state.tx	.us	Version V1.0.33394	ļ

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 23

				2 01 2	.3
13 C / OH NAME	Gonzales III, David		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu . These expenditures may have been made without d officeholders are required to report this informatio	t the candidate's or officeh	holder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	-	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
	1				
16 CONTIBUTION TOTALS	1. TOTAL POLITICA LOANS, OR GUA	.I	THAN PLEDGES,	\$ 0	0.00
		ICAL CONTRIBUTIONS		\$ 0	0.00
EXPENDITURE		PLEDGES, LOANS, OR GUARANTEES OF LOAN. AL EXPENDITURES OF \$100 OR LESS, UNLESS			
TOTALS		ICAL EXPENDITURES	TILIVIIZED		0.00
				\$ 2,255	.16
CONTRIBUTION BALANCE	REPORTING PE			\$ 20,813	.42
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA OF THE REPORT	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0	0.00
17 AFFADAVIT		l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	y of perjury, that the acco ıll information required to	ompanying report is be reported by me	
	ROSA NELLY SANCHE Notary Public, State of To My Commission Expire June 23, 2015	Texas res	f Candidate or Officeholde	er er	
	TARY STAMP / SEAL ABC				
Sworn to and subsc	cribed before me, by the sa	paid David Gonzales, III ertify which, witness my hand and seal of office.	, this the4th	day	
oiJanuary	, 20, 10 001	fully Willion, with less my hand and sear of office.			
Row Melly	Hanche	Rosa Nelly Sanchez Not	tary in the Sta	ate o <u>f Texas</u>	
Signature of offic	cer administering oath	Printed name of officer administering oath		administering oath	

POSA NETTY SANCHEZ Norary Public, State of Taxas My Commission Expires June 23, 2016

The state of the

FORM JC/OH **SUBTOTALS - JC/OH COVER SHEET PG 3 18 FILER NAME** 19 Filer ID Gonzales III, David 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) 1. \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ SCHEDULE E(J): LOANS (JUDICIAL) \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. X \$ 1,442.58 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 985.23 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ 11. $|\mathsf{x}|$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 472.65 SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee I	Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Vages	/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		•	3 110W to 65	Inbic	3	3 Filer ID
	Sch: 1/5 Rpt: 4/23	Gonzales III,	, David				
4	Date	5 Payee name					
	11/17/2015	Brownsville	Independent School Distr				
6	Amount (\$)	7 Payee addres		te; Zip Co	de		
	\$150.00	1900 East P	rice				
		Browsville,	TX 78520				
8	PURPOSE		e Categories listed at the top of this so	shadula)	(b)	Description	
-	OF EXPENDITURE	l .	e Categories listed at the top of this so Fundraising Expense	cheaule)	(~,	Check if travel out	tside of Texas. Complete Schedule T.
	LAFLINDITORE					<u></u>	X, officeholder living expense Club, Feeding Needy Family
						Garda migrani	Club, reeding Needy Family
9	Complete ONLY if direct	L Candidate/Offic	eholder name	Office sou	ght		Office held
	expenditure to benefit C/O	Н					
	Date	Payee name					
	12/15/2015	Chase Freed					
	Amount (\$)	Payee address	•	e; Zip Co	de		
	\$653.71	P. O. Box 94	.014				
		Palatine, IL 6	50094-4014				
	PURPOSE	(a) Category (Ser	e Categories listed at the top of this sc	chedule)	(b)	Description	
	OF EXPENDITURE	Credit Card I	Payment			느	tside of Texas. Complete Schedule T. X, officeholder living expense
	1				1	See F4	The state of the s
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Offic H	eholder name	Office sou	ght		Office held
—	Date	Payee name					
	07/08/2015	Chase Freed	mol				
	Amount (\$)	Payee address	s; City; State	e; Zip Co	de		
	\$13.98	P. O. Box 94	014				
		Palatine, IL 6	20004 4014				
_	PURPOSE			. 1	(h)	D-seriation	
	OF	Credit Card F	e Categories listed at the top of this sc Payment	:hedule)	(D)	Description Check if travel outs	side of Texas. Complete Schedule T.
	EXPENDITURE					LI	X, officeholder living expense
						See F4	
	Complete ONLY if direct	Candidate/Office	eholder name	Office sou	aht		Office held
	expenditure to benefit C/OF		SHOREST TRANS	000 00	<i>3</i> 1110		Cindo Hala

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 2/5 Rpt: 5/23 Gonzales III, David 4 Date Payee name 08/10/2015 Chase Freedom 6 Amount (\$) Payee address; City; State; Zip Code \$13.98 P. O. Box 94014 Palatine, IL 60094-4014 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense See F4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/14/2015 Chase Freedom Amount (\$) Payee address; City; State; Zip Code \$13.98 P. O. Box 94014 Palatine, IL 60094-4014 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense See F4 Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 10/09/2015 Chase Freedom Amount (\$) Payee address; City; State; Zip Code \$13.98 P. O. Box 94014 Palatine, IL 60094-4014 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense See F4 Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Gilt/Awards/Memorials Expens Legal Services The Instruction Guide ex	se Printing Salarie		se es/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM			-		3	Filer ID	
	Sch: 3/5 Rpt: 6/23	Gonzales II					ľ	THE IS	
4	Date	5 Payee name					1		
	11/09/2015	Chase Free	edom						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip (Code				
	\$13.98	P. O. Box 9	94014						
		Palatine, IL	. 60094-4014						
8	PURPOSE	(a) Category (s	see Categories listed at the top of	f this schedule)	(b)	Description			
	OF EXPENDITURE	Credit Card	l Payment			<u></u>		e of Texas. Complete Schedule T.	
						See F4	, Ιλ, ι	officeholder living expense	
						000			
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	 ouaht			Office held	
	expenditure to benefit C/OI							· · · · · · · · · · · · · · · · · · ·	
	Date	Payee name							
	12/21/2015	Chase Quic	cken						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	Code				
	\$70.00	P.O. Box 94	4014						
	!								
	,	Palatine, IL	60094-4014						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Credit Card						e of Texas. Complete Schedule T.	
						Check if Austin, See F4	, TX, a	fficeholder living expense	
						See 14			
	Complete <u>ONLY</u> if direct	Candidate/Off	iceholder name	Office so	l niaht			Office held	
	expenditure to benefit C/O				-9				
-	Date	Payee name		<u></u>					
	08/28/2015	Chase Sap	nhire						
	Amount (\$)	Payee addres		State: Zin (oho.				
	\$18.97	P.O. Box 94	•	State; Zip C	,0ue				
	Ψ±0.57	F.O. BOX 5-	IOT4						
		Palatine, IL	60094-4014						
	PURPOSE				1/h)	Description			
	OF	Credit Card	ee Categories listed at the top of	this schedule)	(5)		outside	e of Texas. Complete Schedule T.	
	EXPENDITURE	Crount Juna	Гаушен			I		fficeholder living expense	
						See F4			
	Complete ONLY if direct		ceholder name	Office so	ught			Office held	
	expenditure to benefit C/OF								

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide expl.		Wages	s/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	7 FILER NAM					Filer ID	
	Sch: 4/5 Rpt: 7/23	Gonzales II	III, David			Ŭ	File ID	
4	Date	5 Payee name	;					
_	12/15/2015	Juvenile De	epartment, Cameron Co	ounty				
6	Amount (\$) \$50.00	7 Payee addre 2310 West San Benito	Hwy 77	State; Zip Co	ode			
8	PURPOSE				T _(b)	Description		
ľ	OF	1	See Categories listed at the top of thi	is schedule)	(n)	Description	ide of Toyon, Complete Schodule T	
1	EXPENDITURE	Solicitation	/Fundraising Expense				ide of Texas. Complete Schedule T. , officeholder living expense	
							Children, in collaboration with Boys	3
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ight		Office held	
	Date	Payee name	1					
	12/04/2015	Lion's Club	International					
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	ode			
	\$160.00	95 Country	Club Road	•				
	·	-						
			e , TX 78520		,			
	PURPOSE OF	I .	See Categories listed at the top of thi	is schedule)	(b)	Description		
	EXPENDITURE	Fees					de of Texas. Complete Schedule T. officeholder living expense	
	1				l	Membership Due		
						Menmeranh Due	35	
	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office sou	ght		Office held	
	Date	Payee name						
	11/24/2015	Maria, Corti						
_	Amount (\$)	Payee addres	ess; City; St	tate; Zip Co	de			
	\$20.00	974 East Ha	•	(dto) = p				
	Ψ20.00	014 2001	дизон					
		Brownsville						
	PURPOSE OF		ee Categories listed at the top of this	is schedule)	(b)	Description		
	EXPENDITURE	Event Expe	nse			I	de of Texas. Complete Schedule T. officeholder living expense	
		İ				—	nksgiving Luncheon Sponsorship	
						Courtiouse mai	IKSGIVING EURONOON OPONSONSINP	
_	Complete ONLY if direct	Candidate/Off	: alder name	Office con	~h+		Office held	
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	gnı		Office field	

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Reverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Gift/Awards/Memorials Expen Legal Services The Instruction Guide e	Salaries/	Expense Wages/Contract L		Travel Out of District OTHER (enter a category not listed abov	re)
1	Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID	
	Sch: 5/5 Rpt: 8/23	Gonzales I						
4	Date	5 Payee name						
	07/31/2015		Vatividad (Mr.)					
6	Amount (\$)	7 Payee addre	•	State; Zip C	ode			
	\$250.00	847 East H	larrison St.					
		Brownsville	e, TX 78520					
8	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b) Descrip	tion		
	OF EXPENDITURE		/Fundraising Expense				de of Texas. Complete Schedule T.	
					1 —		officeholder living expense es for Step Daughter's Canc	or
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9	Complete ONLY if direct	Candidate/Off	ficeholder name	Office so	<u>I</u>		Office held	
ľ	expenditure to benefit C/O			211100 301	-a'''		5.1100 Hold	
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EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Event Expense Loan Repayment/Reimbursement Fees Food/Beverage Expense Accounting/Banking Consulting Expense Office Overhead/Rental Expense Polling Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 1/13 Rpt: 9/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 12/07/2015 Amazon Inc. 7 Amount (\$) Payee address; City; State; Zip Code \$442.74 410 Terry Avenue Seattle, WA 98109 TYPE OF |X|Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Scanner for organizing files 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/07/2015 Amazon Inc. Payee address; State; Zip Code Amount (\$) City; \$51.84 410 Terry Avenue Seattle, WA 98109 TYPE OF Х Political Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Printing Equipment** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Travel in District Office Overhead/Rental Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 2/13 Rpt: 10/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 12/07/2015 Apple Inc. 7 Amount (\$) Payee address; City; State; Zip Code \$54.11 1 Infinite Loop Cupertino, CA 95014 TYPE OF \mathbf{x} Political Non-Political **EXPENDITURE** PURPOSE 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Software for Organizing Files Candidate/Officeholder name 11 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 07/05/2015 Brownsville Herald Newspaper State; Zip Code Amount (\$) Payee address; City; \$6.99 1135 East Van Buren St. Brownsville, TX 78520 TYPE OF Political Non-Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Newspaper Subscription** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.33394

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Fees Office Overhead/Rental Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 3/13 Rpt: 11/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date 6 Payee name 08/06/2015 Brownsville Herald Newspaper 7 Amount (\$) Payee address; City; State; Zip Code \$6.99 1135 East Van Buren St. Brownsville, TX 78520 TYPE OF Political Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Newspaper Subscription** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/03/2015 Brownsville Herald Newspaper Amount (\$) Payee address; City; State; Zip Code \$6.99 1135 East Van Buren St. Brownsville, TX 78520 TYPE OF Political X Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper Subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Travel in District Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 4/13 Rpt: 12/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 10/04/2015 Brownsville Herald Newspaper 7 Amount (\$) Payee address; City; State; Zip Code \$6.99 1135 East Van Buren St. Brownsville, TX 78520 TYPE OF 9 |X|Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper Subscription 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/05/2015 Brownsville Herald Newspaper Amount (\$) Payee address; City; State; Zip Code \$6.99 1135 East Van Buren St. Brownsville, TX 78520 TYPE OF Political Non-Political |X|**EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Newspaper Subscription** Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

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EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 5/13 Rpt: 13/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 12/06/2015 Brownsville Herald Newspaper 7 Amount (\$) 8 Payee address; City; State; Zip Code \$6.99 1135 East Van Buren St. Brownsville, TX 78520 TYPE OF Political Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Fees Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper Subscription 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/09/2015 Cheddar's Restaurant Amount (\$) Payee address; City; State; Zip Code \$35.29 2495 N. Expressway 83 Brownsville, TX 78520 TYPE OF Political Non-Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Travel in District Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By -Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 6/13 Rpt: 14/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 6 Payee name 08/28/2015 Denny's 7 Amount (\$) 8 Payee address; City: State; Zip Code \$18.97 1875 North Expressway 77 Brownsville, TX 78520 TYPE OF \square Political Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch with Constituents 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/11/2015 Dollar Tree Amount (\$) Payee address; City; State; Zip Code \$55.21 1552 Palm Blvd Suite A Brownsville, TX 78520 TYPE OF Х Political Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gifts giveaway for Needy Children organized by Sofia Benavidez Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Fees Food/Beverage Expense Transportation Equipment & Related Expense Polling Expense Printing Expense Travel in District Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 7/13 Rpt: 15/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 6 Payee name 09/25/2015 **Dunkin Donuts** Amount (\$) Payee address; City; State; Zip Code \$9.27 2409 Boca Chica Blvd. Brownsville, TX 78520 TYPE OF Political Non-Political \mathbf{X} **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Snacks for Jurors 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/13/2015 Kirkland's Store Amount (\$) Payee address; City; State; Zip Code \$10.83 2370 North Expressway 77 Brownsville, TX 78520 TYPE OF X Political Non-Political **EXPENDITURE** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Xmas Gifts for Needy Families Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Office Overhead/Rental Expense Polling Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 8/13 Rpt: 16/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 08/25/2015 Kumori Restaurant 7 Amount (\$) Payee address; City; State; Zip Code \$43.63 3340 Pablo Kisel Brownsville, TX 78521 TYPE OF Political \overline{X} Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Luncheon Candidate/Officeholder name 11 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 12/14/2015 Stefano's Restaurant Amount (\$) Payee address; City; State; Zip Code \$24.46 4201 West Business 83 Harlingen, TX 78551 TYPE OF Non-Political Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Luncheon Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Travel in District Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 9/13 Rpt: 17/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 6 Payee name 09/24/2015 Texas Center for the Judiciary 7 Amount (\$) Payee address; City; State; Zip Code \$60.00 1210 San Antonio Street Suite 800 Austin, TX 78701 TYPE OF Political X Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Education Conference Fee 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/06/2015 Texas Parks and Wildlife Amount (\$) Payee address; City; State; Zip Code \$70.00 4200 Smith School Road Austin, TX 78744 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Event Expense Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Travel in District Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 10/13 Rpt: 18/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 6 Payee name 12/13/2015 Things Remembered Store 7 Amount (\$) Payee address; City: State; Zip Code \$25.00 2370 North Expressway Brownsville, TX 78520 TYPE OF 9 |X|Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Xmas Gift for Judge Leal in recognition for fundraising and gifts 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/05/2015 Valley Morning Star Amount (\$) Payee address; City; State; Zip Code \$6.99 1310 South Commerce St. Harlingen, TX 78550 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper Subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Accounting/Banking Fees Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 11/13 Rpt: 19/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 6 Payee name 08/06/2015 Valley Morning Star 7 Amount (\$) Payee address; City; State; Zip Code \$6.99 1310 South Commerce St. Harlingen, TX 78550 9 TYPE OF Political Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Newspaper Subscription** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/03/2015 Valley Morning Star Amount (\$) Payee address; City; State; Zip Code \$6.99 1310 South Commerce St. Harlingen, TX 78550 TYPE OF Political Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper Subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH



EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Office Overhead/Rental Expense Food/Beverage Expense Gilt/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 12/13 Rpt: 20/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 10/04/2015 Valley Morning Star Amount (\$) 8 Payee address; City; State; Zip Code \$6.99 1310 South Commerce St. Harlingen, TX 78550 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Newspaper Subscription** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/05/2015 Valley Morning Star Amount (\$) Payee address; City: State; Zip Code \$6.99 1310 South Commerce St. Harlingen, TX 78550 TYPE OF Political Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper Subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Event Expense Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel in District Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 13/13 Rpt: 21/23 Gonzales III, David TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 6 Payee name 12/06/2015 Valley Morning Star 7 Amount (\$) Payee address; State; Zip Code \$6.99 1310 South Commerce St. Harlingen, TX 78550 TYPE OF Political X Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Newspaper Subscription** Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

SCHEDULE I

Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Gonzales III, David		3 Filer ID			
Date 09/24/2015	5 Payee name Capital One Venture					
Amount (\$) 60.00	7 Payee Address; City; State; Zip P.O. Box 60024					
	City of Industry, CA 91716-2564 (a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)					
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description See F4	(See instructions regarding type of information required			
Date	Payee name					
12/21/2015	Chase Quicken					
Amount (\$)	Payee Address; City; State; Zip					
24.46	P.O. Box 94014					
	Palatine, IL 60094-4014					
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description See F4	(See instructions regarding type of information required.			
Date	Payee name					
08/31/2015	Chase Sapphire					
Amount (\$)	Payee Address; City; State; Zip	·				
78.92	P.O. Box 94014					
	Palatine, IL 60094-4014					
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description See F4	(See instructions regarding type of information required.			
Date	Payee name					
10/14/2015	Chase Sapphire					
Amount (\$)	Payee Address; City; State; Zip					
9.27	P.O. Box 94014					
	Palatine, IL 60094-4014	/I-) - · · ·	(0)			
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description See F4	(See instructions regarding type of information required.			



SCHEDULE I

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Gonzales III, David 3 Filer ID								
4	Date 12/17/2015	5 Payee name Pena, Leofredo (Mr.)								
6	Amount (\$) 300.00	7 Payee Address; City; State; Zip 974 E. Harrison Brownsville, TX 78520								
8	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense (b) Description (See instructions regarding type of information required.) Water for Staff and food for Jurors								