# DAVID III GONZALEZ

#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The JC/OH Instruction Guide explains how to complete this form. 16 CANDIDATE / MS/MRS/MR FIRST М OFFICE USE ONLY **OFFICEHOLDER** David NAME **CAMERON COUNTY** DEPARTMENT OF ELECTIONS & **VOTER REGISTRATION NICKNAME** LAST **SUFFIX** Gonzales III . 1 4 2017 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE Date Hand-delivered or Date Postmarke **OFFICEHOLDER** P. O. Box 1632 MAILING **ADDRESS** Change of Address Brownsville, TX 78522 Date Processed Date Imaged CAMPAIGN MS/MRS/MR **FIRST** MI **TREASURER** NAME Armando NICKNAME LAST SUFFIX Sanchez CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE: ZIP CODE TREASURER ADDRESS 113 N Valencia Bayview, TX 78566 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 455-0160 PHONE REPORT TYPE 15th day after campaign treasurer appointment (officeholder only) January 15 30th day before election Runoff 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) Х July 15 PERIOD Month Day Year Month Day Year COVERED THROUGH 01/01/2017 06/30/2017 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year X Primary Runoff Other 03/06/2018 General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Statutory County Judge Place 3 District Cameron Statutory County Judge Place 3 District Cameron **GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 16

13 C / OH NAME	Gonzales III, David	1	4 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without the d officeholders are required to report this information of	e candidate's or officeho	older's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE ADDITES		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH ARANTEES OF LOANS), UNLESS ITEMIZED	AN PLEDGES,	\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
EXPENDITURE TOTALS	<del> </del>	AL EXPENDITURES OF \$100 OR LESS, UNLESS IT		\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 1,131,89
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY OF THE	\$ 14,045.26
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS O TING PERIOD	F THE LAST DAY	\$ 0.00
17 AFFADAVIT				
	Laura Patricia Perez	l swear, or affirm, under penalty o true and correct and includes all in under Title 15, Election Code.		
	Notary Public, State of Texa My Commission Expires 06-12-2019	J MA	andidate or Officeholde	>
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subscoor $\frac{\mathrm{July}}{\mathrm{of}}$	1-7	aid <u>David Gonzales, III</u> ertify which, witness my hand and seal of office.	_, this the13t1	hday
Signature of office	per administering oath	Laura Patricia Perez  Printed name of officer administering oath	Notary in the State of '	

# SUBTOTALS - JC/OH

# FORM JC/OH COVER SHEET PG 3

3 of 16

18 FIL	18 FILER NAME 19 Filer ID				
Go	Gonzales III, David				
		E SUBTOTALS		SURT	TOTAL AMOUNT
NA ———	ME OF	SCHEDULE		305	TOTAL ANGOINT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	0.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	X	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	0.00
4.	X SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00	
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	1,131.89	
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$		
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$		
				•	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:
		Sch: 1/1 Rpt: 4/16
2 FILER NAME Gonzales III, David		3 Filer ID
4		· · · · · · · · · · · · · · · · · · ·
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB		\$ 0.00
5 Date 6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 19 In-kind contribution contribution (\$) description
7 Contributor address; City; State; Zip Code		
		į
		Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-	
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (	FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor	r's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
<del></del>		
•		

				SCHEDULE B(J)	
The In	nstruction Guide explains how	to complete this form.	1 Total pages Sch Sch: 1/1 Rpt:		
FILER NAME			3 Filer ID		
Gonzales III,	David		gonzales4jud	ge@gmail.com	
TOTAL OF	UNITEMIZED PLEDGES			\$ 0.00	
Date	6 Full name of pledgor out-of	6 Full name of pledgor out-of-state PAC (ID#:)		9 In-kind description (If applicable)	
	7 Pledgor Address; City	; State; Zip Code			
) Pledgor's princ	sipal occupation	11 Pledgor's job title		outside of Texas. Complete Schedu	
Pledgor's emp	louer/lour firm	12 Law firm of plad	gor's spouse (if any)		
: Pleayor's emp	loyemaw iimi	To Law min or pieci	yors spouse (ii arry)		
	by Texas Ethics Commission	www.ethics.state.tx.us		Version V1.0.2	

LOANS (J	IUDICIAL)				SCI	HEDULE E	(J)
The Instruction Guide evaluing how to complete this form			otal pages Sche				
2 FILER NAME Gonzales III, Da	vid			3 F	iler ID		
4 TOTAL OF UN	NITEMIZED LOANS	-			\$		0.00
5 Date of loan	7 Name of lender	out-of-state PA	AC (ID#:		9 Loar	n Amount (\$)	
6 Is lender a financial institution?	8 Lender address; City;	State;	Zip Cođe			est Rate	
					11 Matu	rity Date	
12 Lender's Principal	Occupation		13 Lender's Job Title		•		
14 Lender's Employe	r/Law Firm		15 Law Firm of lender's	s spouse (if a	ny)		
16 If lender is child, la	aw firm of parent(s) (if any)						
17 Description of Col	lateral		18 Check if personal funds were deposited into political account  (See Instructions)				
19 GUARANTOR INFORMATION	20 Name of guarantor		22 Amount Guaranteed		d (\$)		
not applicable	not applicable 21 Guarantor address; City; State; Zip Code						
23 Guarantor's Principal Occupation 2			24 Guarantor's Job Titl	e			
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)					
27 If guarantor is chil	d, law firm of parent(s) (if any)						

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 1/8 Rpt: 7/16	Gonzales III, David
4 Date	5 Payee name
02/10/2017	Brownsville Chamber of Commerce
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$125.00	1600 University Blvd
	Brownsville , TX 78520
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI CIDITORE	Check if Austin, TX, officeholder living expense
	Chamber membership
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/22/2017	Brownsville Herald Newspaper
Amount (\$)	Payee address; City; State; Zip Code
\$6.99	1135 East Van Buren St.
φ0.33	1133 East van Bulen 31.
	Brownsville, TX 78520
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPERIENCE	Check if Austin, TX, officeholder living expense
	Periodical subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/25/2017	Brownsville Herald Newspaper
Amount (\$)	Payee address; City; State; Zip Code
\$6.99	1135 East Van Buren St.
Ф0.99	IIOO East van duien st.
	Brownsville, TX 78520
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas, Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Subscription
0	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name ' Office sought Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment	al 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 F1: Sch: 2/8 Rpt: 8/16	2 FILER NAME  Gonzales III, David  3 Filer ID
4 Date	5 Payee name
04/24/2017	Brownsville Herald Newspaper
6 Amount (\$) \$6.99	7 Payee address; City; State; Zip Code 1135 East Van Buren St.  Brownsville, TX 78520
8 PURPOSE	(a) Category (see Calegories listed at the top of this schedule) (b) Description
OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/23/2017	Brownsville Herald Newspaper
Amount (\$)	Payee address; City; State; Zip Code
\$6.99	1135 East Van Buren St.  Brownsville, TX 78520
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Offfice Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/23/2017	Brownsville Herald Newspaper
Amount (\$) \$6.99	Payee address; City; State; Zip Code 1135 East Van Buren St.
	Brownsville, TX 78520
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Haling Commission Warrion VI D 20 45

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/8 Rpt: 9/16 Gonzales III, David 4 Date Payee name 01/26/2017 Brownsville Herald Newspaper 6 Amount (\$) Payee address; State; Zip Code City: \$6.99 1135 East Van Buren St. Brownsville, TX 78520 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2017 Cameron County Bar Assoc. Payee address; Amount (\$) City; State; Zip Code \$100.00 P. O. Box 3866 Brownsville, TX 78523-3866 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Bar Fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/03/2017 Facebook Inc. Amount (\$) Payee address; City; State; Zip Code \$34.12 P. O. Box 10005 Palo Alto, CA 94303 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Pushing Post Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor  Solicitation//-undraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1; Sch: 4/8 Rpt: 10/16	2 FILER NAME Gonzales III, David	3 Filer ID
4 Date 03/01/2017	5 Payee name Facebook Inc.	
6 Amount (\$) \$1.00	7 Payee address; City; State; P. O. Box 10005 Palo Alto, CA 94303	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Post boost
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ffice sought Office held
Date 03/03/2017	Payee name Google Inc.	-
Amount (\$) \$12.00	1600 Amphitheatre Parkway	Zip Code
PURPOSE OF EXPENDITURE	Mountain View, CA 94043  (a) Category (See Categories listed at the top of this sche Advertising Expense	(b) Description Check If travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Web design
Complete ONLY if direct expenditure to benefit C/O		ffice sought Office held
Date 05/31/2017	Payee name Harlingen Humane Society	
Amount (\$) \$100.00	Payee address; City; State; 1106 Markowsky Ave.	Zip Code
	Harlingen, TX 78550	
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this sche Event Expense	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Fundraiser for animals
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ffice sought Office held
Forms provided by Teyas F	thics Commission www.ethics.sl	tate ty us

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 5/8 Rpt: 11/16	Gonzales III, David
4 Date	5 Payee name
04/12/2017	Querido Mexico Lindo
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$14.89	2403 Boca Chica Blvd.
	Brownsville, TX 78521
8 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Staff breakfast
Complete ONLY if direct expenditure to benefit C/O	L L Candidate/Officeholder name Office sought Office held H
Date	Payee name
02/09/2017	Ramirez, Tommy (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	2310 U.S. Business 77
	San Benito, TX 78586
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Farewell to Chief Juvenile Officer
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/09/2017	Texas Center for the Judiciary
Amount (\$)	Payee address; City; State; Zip Code
\$275.00	1210 San Antonio Street
,,,,,	
	Suite 800
	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas, Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Judicial Conference
Complete ONI V if dive-t	Condidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 6/8 Rpt: 12/16	Gonzales III, David
4 Date 05/08/2017	5 Payee name Texas Parks and Wildlife
6 Amount (\$) \$70.00	7 Payee address; City; State; Zip Code 4200 Smith School Road Austin, TX 78744
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense  Park membership
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name ,
05/25/2017	The Texas Observer
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	54 Chicon Street  Austin, TX 78702
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/08/2017	USPS
Amount (\$) \$166.00	Payee address; City; State; Zip Code  1001 E. Elizabeth St Floor 1 Brownsville, TX 78520
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Offlice Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailbox
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment  1 Total pages Schedule F1: Sch: 7/8 Rpt: 13/16  4 Date 06/22/2017  6 Amount (\$) \$6.99	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Loan Repayment/I Office Overhead/R Polling Expense ense Printing Expense Salaries/Wages/Co e explains how to complete  State; Zip Code	Reimbursement Rental Expense contract Labor e this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Expen	nse 📗 🗀		e of Texas. Complete Schedule T. officeholder living expense iption
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name I	Office sought		Office held
Date 05/25/2017	Payee name Valley Morning Star			
Amount (\$) \$6.99	Payee address; City; 1310 South Commerce St.  Harlingen, TX 78550	State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Expen	nse   [	<u></u>	e of Texas. Complete Schedule T. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought		Office held
Date 04/24/2017	Payee name Valley Morning Star			
Amount (\$) \$6.99	Payee address; City; 1310 South Commerce St.  Harlingen, TX 78550	State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top Office Overhead/Rental Expen	nse E	<b></b>	e of Texas, Complete Schedule T. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought		Office held
Forms provided by Teyas Fi		ethics state ty us		Version V1 0 2645

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District  y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 8/8 Rpt: 14/16	Gonzales III, David
4 Date 03/23/2017	5 Payee name Valley Morning Star
6 Amount (\$) \$6.99	7 Payee address; City; State; Zip Code 1310 South Commerce St.  Harlingen, TX 78550
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
02/23/2017	Valley Morning Star
Amount (\$) \$6.99	Payee address; City; State; Zip Code  1310 South Commerce St.  Harlingen, TX 78550
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 01/26/2017	Payee name Valley Morning Star
Amount (\$) \$6.99	Payee address; City; State; Zip Code 1310 South Commerce St. Harlingen, TX 78550
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	thics Commission waww.ethics.state.tv.us. Version.V1.0.2645

# **UNPAID INCURRED OBLIGATIONS** SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 15/16 Gonzales III, David \$ 0.00 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 6 Payee name 5 Date 7 Amount (\$) State; Zip Code 8 Payee address; City; TYPE OF 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. **EXPENDITURE** 11 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 Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By -Travel in District Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 1/1 Rpt: 16/16 Gonzales III, David \$ 0.00 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 7 Amount (\$) 8 Payee address; State; Zip Code City; TYPE OF 9 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. **EXPENDITURE** 11 Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Forms provided by Texas Ethics Commission Version V1.0.2645

www.ethics.state.tx.us