DAVID GONZALEZ, III

	CANDIDATE / OFFICEH N FINANCE REPORT	IOLDER	FORM JC/OH COVER SHEET PG 1
The JC/OH Instruction	Guide explains how to complete this fo	rm. 1 Filer ID	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST David	MI	OFFICE USE ONLY Date Received
	NICKNAME LAST Gonzales	SUFFIX 6 III	CAMERON COUNTY DEPARTMENT OF ELECTIONS 8
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; P. O. Box 1632	CITY; ZIP CODE	Date Hand-delivered or Date Postmarked VIND JAN 1 6 2018 Receipt # Amount FECEIVED
Change of Address	Brownsville, TX 78522		Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRST		MI
TREASURER NAME	Ms. Melinda		W.
	NICKNAME LAST Garza		SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEAS 3495 Boca Chica Blvd.	SE); APT / SUITE #; CITY Brownsvi ll	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER 956 462-0045	R EXTENSION	
8 REPORT TYPE		before election Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 07/01/2017	Month Day THROUGH 12/31/20	Year 17
10 ELECTION	ELECTION DATE Month Day Year 03/06/2018	ELECTION TYPE X Primary Runoff General Special	Other
11 OFFICE	OFFICE HELD (if any) Statutory County Court at Law I County	No. 3 Cameron Statutory Count County	T (if known) ty Court at Law # 3 Cameron
	G	GO TO PAGE 2	

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 15

				2 01 13
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 I officeholders are required to report this informatio	the candidate's or officeh-	older's knowledge or
Additional Pages	COMMITTEE TYPE	,		
	GENERAL	OOLMITTEE ADDRESS		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 0,00
	i	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	SI	\$ 0.00
EXPENDITURE	 	AL EXPENDITURES OF \$100 OR LESS, UNLESS		\$ 0.00
TOTALS	4. TOTAL POLITI	CAL EXPENDITURES		\$ 3,056.32
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 12510.17
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT		l swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
	BRENDA CARMELA CANTU IY COMMISSION EXPIRES August 26, 2018	Signature of	Candidate or Officeholde	er
AFFIX NO	TARY STAMP / SEAL ABO	1		
Sworn to and subsc	cribed before me, by the satisfies $X = X + X = X = X$	aid <u>Savid Conzades</u> rtify which, witness my hand and seal of office.	, this the	لام day
7		Berda Cantú)	Notary for the	State of th
Signature of offic	er administering oath	Printed name of officer administering oath	ॳitle of officer a	dministering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				3 of 15						
	18 FILER NAME 19 Filer ID									
Go	Gonzales III, David									
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE SUBTOTAL AMOUNT										
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	:	\$						
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$						
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$						
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$						
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	}	\$ 1,760.88						
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$						
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 704.54						
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	,	\$ 590.90						
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$						
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$						
12,	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 275.00						

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Glft/Awards/Memorials Expe Legal Services The Instruction Guide	Salar	_	es/Contract Labor	Travel Out of District OTHER (enter a category not listed abo	ve)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	
	Sch: 1/6 Rpt: 4/15		Gonzales II						
4	Date	5	Payee name						
	07/24/2017		Brownsville	Herald Newspaper					
6	Amount (\$)	7	Payee addre	ss; City;	State; Zip	Code			
	\$6.99		•	√an Buren St.	•				
	•								
			Brownsville	, TX 78520					
8	PURPOSE	(a	Category (S	ee Categories ilsted at the top	of this schedule)	(b	Description		
	OF EXPENDITURE		Fees	,	·		Check if travel ou	tside of Texas. Complete Schedule T.	
	EXPENDITORE							X, officeholder living expense	
							Newspaper		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	Office	sought	:	Office held	
	Date		Payee name				· · · · · · · · · · · · · · · · · · ·	·	
	08/24/2017		Brownsville	Herald Newspaper					
	Amount (\$)	_	Payee addre	ss; City;	State; Zip	Code			
	\$6.99		•	√an Buren St.	•				
	·								
			Brownsville	, TX 78520					
	PURPOSE	(a)	Category (S	ee Categories listed at the top	of this schedule)	(b	Description		
	OF EXPENDITURE		Fees				<u> </u>	tside of Texas. Complete Schedule T.	
	LM LIBRONE					İ	السبا	X, officeholder living expense	
							Newspaper		
				,		Ш			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	Office	sought		Office held	
	Date		Payee name						
	09/25/2017		-	Herald Newspaper					
	Amount (\$)	H	Payee addre	ss; City;	State; Zip	Code			
	\$6.99		•	√an Buren St.					
	φοίσο		1100 2000	vair Baron ot.					
			Brownsville	, TX 78520					
	PURPOSE	(a)	Category (S	ee Categories listed at the top	of this schedule)	(b	Description		
	of Expenditure		Fees				ليسيا	tside of Texas. Complete Schedule T.	
	DA ERBITONE						_	X, officeholder living expense	
							Newspaper		
		<u> </u>							
	Complete ONLY if direct		Candidate/Offi	iceholder name	Office	sought		Office held	
	expenditure to benefit C/O	-1 						<u>. </u>	
-									

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services	Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not lister	·
			The Instruction Guide explains	how to cor	nplete this form.		
1	Total pages Schedule F1: Sch: 2/6 Rpt: 5/15	2 FILER NAMI Gonzales II				3 Filer ID	
4	Date	5 Payee name	;			•	
	10/26/2017		e Herald Newspaper				
6	Amount (\$)	7 Payee addre	ess; City; State;	; Zip Coo	e		
	\$6.99		Van Buren St.				
	DUDDOOF		e, TX 78520		(ta) =		
8	PURPOSE OF EXPENDITÜRE	(a) Category (s Fees	see Categories listed at the top of this sch	edule)		outside of Texas. Complete Schedule T. n, TX, officeholder !lving expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name C	Office soug	jht	Office held	
	Date	Payee name	•				
	11/24/2017	Brownsville	Herald Newspaper				
	Amount (\$)	Payee addre	ess; City; State;	; Zip Coo	de		
	\$6.99	1135 East \	Van Buren St.			i .	
		Brownsville	e, TX 78520				
	PURPOSE OF EXPENDITURE	(a) Category (s Fees	See Categories listed at the top of this scho	edule)	<u></u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name C	Office soug	jht	Office held	
	Date	Payee name					
	12/26/2017	Brownsville	e Herald Newspaper				
	Amount (\$) \$6,99	Payee addre	ess; City; State; Van Buren St.	; Zip Coo	le		
		Brownsville	e, TX 78520				
	PURPOSE OF	(a) Category (s	See Categories listed at the top of this sch	edule)	(b) Description		
	EXPENDITURE	Fees			<u></u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name C	Office soug	_j ht	Office held	

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Food/Beverage Expense Printing Expen	pense Travel Out of District (ages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1: Sch: 3/6 Rpt: 6/15	2 FILER NAME Gonzales III, David	3 Filer ID
4 Date	5 Payee name	
11/20/2017	Cameron County Democratic Party	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$1,500.00	P. O. Box 4647	
	Brownsville , TX 78523	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Democratic Ballot Filing Fee
		Democratic Ballot Filling 1 cc
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/Ol		gnt Onice neid
Date	Payee name	
08/29/2017	Facebook Inc.	
Amount (\$)	Payee address; City; State; Zip Co	de
\$20.00	P. O. Box 10005	
	Palo Alto, CA 94303	
PURPOSE OF	• · · · · · · · · · · · · · · · · · · ·	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Boost campaign
		. •
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ght Office held
Date	Payee name	
12/11/2017	Facebook Inc.	
Amount (\$)	Payee address; City; State; Zip Co	de
\$50,00	P. O. Box 10005	
	Palo Alto, CA 94303	
PURPOSE OF	, (,,,,,	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Boost post
Complete ONLY if direct	Candidate/Officeholder name Office sout	ght Office held
expenditure to benefit C/O	1	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense Candidate/Officeholder/Political Committee Credit Card Payment Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 4/6 Rpt: 7/15 Gonzales III, David 4 Date Payee name 07/12/2017 Harland Clarke Corp. State; Zip Code 6 Amount (\$) Payee address; City; \$32.00 15955 La Cantera Parkway San Antonio, TX 78256 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Reorder of campaign checks Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 07/17/2017 **RGV Hispanic Chamber of Commerce** Amount (\$) Payee address; City; State; Zip Code \$75,00 801 East Fern Suite 163 McAllen, TX 78501 **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 Chamber membership fee Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 07/24/2017 Valley Morning Star Amount (\$) Payee address; City; State; Zip Code \$6.99 1310 South Commerce St. Harlingen, TX 78550 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 Subscription for newspaper Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advatising Eupanea

	Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services The Instruction Guide e		Office Ove Polling Exp Printing Ex Salaries/M	rhead pense pens (pens	se /Contract Labor		Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed a	·
1	Total pages Schedule F1:	2	FILER NAME		-		-		3	Filer ID	
	Sch: 5/6 Rpt: 8/15	_	Gonzales III							THE TE	
4	Date	5	Payee name								
	08/24/2017		Valley Morn	ing Star							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de				
Ì	\$6.99		1310 South	Commerce St.							
			Harlingen, T	X 78550							
8	PURPOSE	(a)	Category (Se	e Categories listed at the top	of this sche	edule)	(b)	Description			·
ĺ	OF EXPENDITURE		Fees			·				de of Texas, Complete Schedule T.	
	LAFEINDITORE							<u> </u>	, TX,	officeholder living expense	
								Newspaper			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	0	ffice sou	ght			Office held	
	Date		Payee name				,,,,,,,,,				
	09/25/2017		Valley Morn	ing Star							
_	Amount (\$)		Payee addres		State:	Zip Co	de				
	\$6.99		-	Commerce St.	Oldie,	2.p 00					
	ψ0.55		1010 00au	·							
•			Harlingen, T	X 78550							
	PURPOSE	(a)	Category (Se	e Categories listed at the top	of this scho	ndule)	(b)	Description			
	OF		Fees	o categories notes at all top	or uno octio	,uuic)	•		outsia	le of Texas. Complete Schedule T.	
	EXPENDITURE							Check if Austin,	TX,	officeholder living expense	
								Newspaper			
	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office held	
	expenditure to benefit C/OF	1									
	Date		Payee name								
	10/26/2017		Valley Morn	ing Star							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de				
	\$6.99		-	Commerce St.		•					
	,										
			Harlingen, T	X 78550							
	PURPOSE	(a)	Category (Se	e Categories listed at the top	of this scho	dule)	(b)	Description			
	OF		Fees			/	•		outsic	le of Texas. Complete Schedule T.	
	EXPENDITURE					ŀ		Check if Austin,	TX	officeholder living expense	
								Newspaper			
	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office held	
	expenditure to benefit C/OF	1									
										· · · · · · · · · · · · · · · · · · ·	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Loan Repayment/Reimbu
Office Overhead/Rental 6

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category) and listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 6/6 Rpt: 9/15	Gonzales III, David
4 Date	5 Payee name
11/24/2017	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) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Newspaper
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/26/2017	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) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Newspaper
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Travel in District Printing Expense Travel Out of District Candidate/Officeholder/Political Committee 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: 1/3 Rpt: 10/15 Gonzales III, David \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name 12/11/2017 Evernote Payee address; Amount (\$) City; State; Zip Code \$46.54 3300 N Interstate 35 Suite 400 Austin, TX 78705 TYPE OF 9 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. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Data storage 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/28/2017 Sideline Payee address; State; Zip Code Amount (\$) City: \$113.64 97 S 2nd #210 San Jose, CA 95113 TYPE OF Non-Political Х Political **EXPENDITURE** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check If Austin, TX, officeholder living expense Campaign phone 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 2/3 Rpt: 11/15 Gonzales III, David \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date 6 Payee name 08/28/2017 TeeHub LLC Amount (\$) Payee address; City; State; Zip Code \$29.90 16381 Scientific Irvine, CA 92618 TYPE OF 9 X 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. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Political t-shirt 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/21/2017 The New York Times Amount (\$) Payee address: City; State; Zip Code \$140.71 620 8th Ave #1 New York, NY 10018 TYPE OF X Non-Political Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper 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 V1.0.5389

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overheat/Rental Expense Event Expense Advertising Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Fees Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor 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: 3/3 Rpt: 12/15 Gonzales III, David 4 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 11/21/2017 The Washington Post 7 Amount (\$) Payee address; City; State; Zip Code \$99.00 1301 K Street, NW Washington DC, DC 20071 9 TYPE OF Non-Political \square 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 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/13/2017 Walgreens Amount (\$) Payee address; City; State; Zip Code \$274.75 4490 International Blvd Brownsville, TX 78521 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. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff appreciation gifts Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH www.ethics.state.tx.us Version V1.0.5389 Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense Event Expense Solicitation/Fundralsing Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel in District Contributions/ Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services 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 G: FILER NAME Filer ID Sch: 1/2 Rpt; 13/15 Gonzales III, David 4 Date Payee name 12/04/2017 Capital One Venture State; Zip Code 6 Amount (\$) Payee address; City; \$239.71 P.O. Box 60024 Reimbursement from political contributions intended City of Industry, CA 91716-2564 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** See schedule F4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/18/2017 Chase Sapphire Amount (\$) Payee address; State; Zip Code City; \$274.75 P.O. Box 94014 Reimbursement from political contributions intended X Palatine, IL 60094-4014 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** See schedule F4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Pavee name 08/29/2017 Discover Bank Amount (\$) Payee address: City: State; Zip Code \$29.90 P.O. Box 30395 Reimbursement from political contributions |x| Salt Lake City, UT 84130-0395 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** See schedule F4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Event Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By -Travel in District Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment 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 G: 2 FILER NAME Filer ID Sch: 2/2 Rpt: 14/15 Gonzales III, David 4 Date Payee name 12/18/2017 Discover Bank Payee address; 6 Amount (\$) City; State; Zip Code \$46,54 P.O. Box 30395 Reimbursement from political contributions intended X Salt Lake City, UT 84130-0395 PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **OF** Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** See schedule F4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 15/15 2 FILER NAME 3 Filer ID Gonzales III, David 5 Name of person from whom amount is received 8 Amount (\$) 09/08/2017 Texas Center for the Judiciary \$275.00 6 Address of person from whom amount is received; City; State; Zip Code 1210 San Antonio Street Austin, TX 78701 Purpose for which amount is received ☐ Check if political contribution returned to filer Conference was cancelled due to Hurricane Harvey