CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr. Joe NICKNAME LAST	MI	Date Received B
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER	AREA CODE PHONE NUMBER	EXTENSION	COUNTY
PHONE 6 CAMPAIGN TREASURER NAME	(210) U12-9939 MS/MRS/MR FIRST Christian NICKNAME LAST HENRICKSEN	MI 	Date Hand-delivered or Date Postmarked Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER	SAN ANTONIO, TX AREA CODE PHONE NUMBER (20) 373-3519	78205 EXTENSION	ZIP CODE
9 REPORT TYPE	January 15 30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year OI / 20 / 2018	THROUGH O2 /	Day Year 24 / 2018
11 ELECTION	ELECTION DATE Month Day Year Primary O3 / 60 / 2018	Runoff Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Bexar County	District Attorney
	GO ТО	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Joe 6	nonzales	5 Filer ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	IOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDI DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WI INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THI URES.	THOUT THE CANDIDATE'S OR OFFICEHOLDER'S	
	COMMITTEE TYPE	COMMITTEE NAME		
	SPECIFIC	SPECIFIC COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	-	
17 CONTRIBUTION TOTALS		 POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ		
	l .	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 912,571.96	
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, SITEMIZED	\$ 526,93	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 34,172.54	
CONTRIBUTION BALANCE	1	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST PORTING PERIOD	s1,055.56	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 AY OF THE REPORTING PERIOD	s 50,000,00	
18 AFFIDAVIT		lancar and the control of the contro	Al-Allo	
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Signature of Candidate or Officeholder				
AFFIX NOTARY STAM				
		by the said 50c GONZALES to certify which, witness my hand and seal of office.	, this the 2 \	
yudiann belosquer Notary Ribic, State of Toxas				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	001211	SHEEFFAG
19	FILER NAME 20 Filer ID (Ethics C	Commission Filers)
	Joe Gonzales	
	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 15,33055
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 897,241.41
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 34,172.56
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/O	+ \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Joe Gonzales 7 Amount of contribution (\$) 4 Date 5 Full name of contributor ut-of-state PAC (ID#:_____ Shannon Locke Contributor address; City; State; Zip Code \$1,500.00 Feb 14, 2018 6 Contributor address; 1008 S Alamo San Antonio, Texas 78210 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney Attorney Full name of contributor out-of-state PAC (ID#:____ Amount of contribution (\$) Date Danny's Recycling Inc. \$2,000.00 Feb 20, 2018 City; State; Zip Code Contributor address; 925 Somerset Rd San Antonio, Texas 78211 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:__ Amount of contribution (\$) Date CWA City; State; Zip Code Contributor address; \$2,500.00 Feb 7, 2018 501 3rd Street, NW Washington, DC 20001 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:___ City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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Revised 9/8/2015

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Joe Gonzales 7 Amount of contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#:____ Jan 30, 2018 The Gonzales Group, CPAs 6 Contributor address; City; State; Zip Code \$1,000.00 6 Contributor address; 7800 IH 10 West, Ste 505 San Antonio, Texas 78230 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor ut-of-state PAC (ID#:_ Date Alberto Flores \$1,000.00 Feb 1, 2018 3817 San Pedro San Antonio, Texas 78212 Code Employer (See Instructions) Principal occupation / Job title (See Instructions) Attorney Attorney Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date Daniel & Hudson PLLC Feb 15, 2018 \$1,000.00 Contributor address; City; State; Zip Code 1815 San Pedrao Ave San Antonio, Texas 78212 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor Date out-of-state PAC (ID#:___ David Menschel Feb 15, 2018 \$1,000.00 City; State; Zip Code Contributor address; 2530 SE 26th Ave Portland, Oregon 97202 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Joe Gonzales 7 Amount of contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#:___ Law Offices of Robert G. Garza Feb 15, 2018 \$500.00 City; State; Zip Code 6 Contributor address; 7800 IH 10 West, Suite 111 San Antonio, Texas 78230 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:___ Amount of contribution (\$) Date Janice Olsen \$500.00 Feb 18, 2018 1043 Kiver GLN W San Antonio, Texas 78216 de Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#:____ Date Jerome Camero \$500.00 Feb 20, 2018 Contributor address; City; State; Zip Code PO Box 241239 San Antonio, Texas 78224 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ Flanary Law Firm Feb 7, 2018 \$800.00 City; State; Zip Code Contributor address; 1005 S. Alamo St. San Antonio, Texas 78210 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Joe Gonzales 7 Amount of contribution (\$) out-of-state PAC (ID#:_ 4 Date 5 Full name of contributor John Lamerson City; State; Zip Code \$250.00 Feb 2, 2018 6 Contributor address; 3314 Prince George Dr San Antonio, Texas 78230 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date Arthur Nicholson Feb 12, 2018 \$250.00 202 Hillview Dr. San Antonio, Texas 78209 Code Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) out-of-state PAC (ID#:____ Full name of contributor Date Katharine Rovinsky \$250.00 Feb 15, 2018 Contributor address; City; State; Zip Code 1200 Broadmoor Dr Apt. 276 Austin, Texas 78723 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#:___ Date Jimmy Toubin \$350.00 Feb 14, 2018 City; State; Zip Code Contributor address; 7410 Blanco Ste 385 San Antonio, Texas 78216 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Joe Gonzales 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:_____ Dolores Belmares Feb 19, 2018 \$100.00 6 Contributor address; City; State; Zip Code 9030 Arabian King Converse, Texas 78109 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:___ Amount of contribution (\$) Karen Norris Feb 25, 2018 1722 Doe Crst San Antonio, Texas 78248 Code \$100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#:_____ Amount of contribution (\$) Roxanne Henricksen Jan 31, 2018 Contributor address; City; State; Zip Code \$200.00 40 E Hampton Dr Seguin, Texas 78155 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:____ Amount of contribution (\$) Catherine Babbitt Feb 18, 2018. . Contributor address; City; State; Zip Code \$200.00 518 Oakleaf Dr San Antonio, Texas 78209 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Joe Gonzales 7 Amount of contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#:____ Henry Hamner City; State; Zip Code \$100.00 Feb 14, 2018 6 Contributor address; 6 Horns Cross San Antonio, Texas 78257 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:____ Amount of contribution (\$) Date Ellen Stephens Feb 18, 2018 \$100.00 8915 Ridge Hollow St. SanAntonio, Texas 78250 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#:____ Date Russell Oldmixon City; State; Zip Code \$100.00 203 Ruelle Ln Apt C San Antonio, Texas 78209 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Full name of contributor Date out-of-state PAC (ID#:_ Vicki Rymill \$100.00 Contributor address; City; State; Zip Code Feb 18, 2018 1315 Aylsbury San Antonio, Texas 78216 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Joe Gonzales 7 Amount of contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#:___ Victory Ostrower \$100.00 Feb 2, 2018 City; State; Zip Code 6 Contributor address; 101 Bristol Grn San Antonio, Texas 78209 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:__ Amount of contribution (\$) Full name of contributor Date Virginia Rivera Feb 2, 2018 \$100.00 Zip Code 1 5318 Rompel Trl San Antonio, Texas 78232 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:____ Amount of contribution (\$) Full name of contributor Date Feb 12, 2018 Steve Hixon \$100.00 City; State; Zip Code Contributor address; 114 Rio Bravo San Antonio, Texas 78232 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:____ Blanche Hamner Feb 14, 2018 \$100.00 Contributor address; City; State; Zip Code 6 Horns Cross San Antonio, Texas 78257 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:
FILER NAME	Sonzales		3 Filer ID (Ethics Commission Filers)
TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBU	JTIONS	\$ 897, 241.41
Date 2/20/2018	 6 Full name of contributor ut-of-state PAC (ID#: Texas Justice & Safety Pac 7 Contributor address; City; State; Zip Code 500 North Akard Street, Suite 3300 Dallas, TX; 75201 		8 Amount of 9 In-kind contribution description \$2,041.00 Palm Cards Check if travel outside of Texas. Complete Schedule T
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)		yer (FOR NON-JUDICIAL)(See Instructions)
2 Contributor's	principal occupation (FOR JUDICIAL)		outor's job title (FOR JUDICIAL) (See Instructions)
4 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law fir	rm of contributor's spouse (if any) (FOR JUDICIAL)
6 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 2/23/2018	Full name of contributor	 de	Amount of Contribution \$\text{In-kind contribution description}\$ \$143,770.82 Media Buy & Production Costs Check if travel outside of Texas. Complete Schedule
Principal oc	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Emplo	oyer (FOR NON-JUDICIAL)(See Instructions)
Contributor	's principal occupation (FOR JUDICIAL)		ibutor's job title (FOR JUDICIAL) (See Instructions)
Contributor	's employer/law firm (FOR JUDICIAL)	Law 1	firm of contributor's spouse (if any) (FOR JUDICIAL)
If contribut	or is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

SCHEDULE A2

THE PERSON NAMED OF THE PE	
The Instruction Guide explains how to complete this form	n. 1 Total pages Schedule A2:
2 FILER NAME Joe Gonzales	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS \$ \$897,241.41
5 Date 6 Full name of contributor out-of-state PAC (ID#:	
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's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	
Date Full name of contributor	Amount of In-kind contribution Contribution \$ description \$17,304.59 Direct Mail
500 North Akard Street, Suite 3300 Dallas, TX; 75	Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	
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Revised 9/8/2015

The Instruction Guide explains how to complete this form		1 Total pages Schedule A2:
The instruction duige explains now to complete this form	1.	11
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Joe Gonzales		
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ \$897,241.41
5 Date 6 Full name of contributor)	8 Amount of . 9 In-kind contribution Contribution \$. description
2/15/2018 Texas Justice & Safety Pac 7 Contributor address; City; State; Zip Cod		\$20,737.00 Direct Mail
500 North Akard Street, Suite 3300 Dallas, TX; 75201	1	Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employ	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contrib	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firr	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date Full name of contributor)	Amount of In-kind contribution Contribution \$ description
Texas Justice & Safety Pac 2/15/2018 Contributor address; City; State; Zip Contributor	de	\$178,380.27 Media Buy & Production Costs
500 North Akard Street, Suite 3300 Dallas, TX; 752	01	Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	ver (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contrib	outor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law fire	m of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ATTACH ADDITIONAL COPIES OF If contributor is out-of-state PAC, please see instruction	THIS SCHED	OULE AS NEEDED

SCHEDULE A2

Th	ne Instruction Guide explains how to complete this form	1.	1 Total pages Schedule A2:
2 FILER NAMI	E Joe Gonzales		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ \$897,241.41
5 Date	6 Full name of contributor)	8 Amount of . 9 In-kind contribution Contribution \$. description
2/13/2018	Texas Justice & Safety Pac		\$11,738.08 Direct Mail
7 Contributor address; City; State; Zip Code		Direct Mail	
	500 North Akard Street, Suite 3300 Dallas, TX; 7	5201	Check if travel outside of Texas. Complete Schedule T.
10 Principal occ	rupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of . In-kind contribution Contribution \$. description
2/15/2018	Texas Justice & Safety Pac		\$14 541 43
	Contributor address; City; State; Zip Cod	de	Direct Mail
	500 North Akard Street, Suite 3300 Dallas, TX;	75201	Check if travel outside of Texas. Complete Schedule T.
Principal occ	rupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firn	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		,
		-	
·· ·· If	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction		

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SCHEDULE A2

Th	e Instruction Guide explains how to complete this form	1.	1 Total pages Schedule A2:
2 FILER NAME	Joe Gonzales		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ \$897,241.41
5 Date 2/8/2018	6 Full name of contributor □ out-of-state PAC (ID#: Texas Justice & Safety Pac 7 Contributor address; City; State; Zip Code 500 North Akard Street, Suite 3300 Dallas, TX; upation / Job title (FOR NON-JUDICIAL) (See Instructions)	75201	8 Amount of 9 In-kind contribution Contribution \$ description \$ 156,345.00 Media Buy Check if travel outside of Texas. Complete Schedule T. er (FOR NON-JUDICIAL)(See Instructions)
10 Finicipal occ	upation / 300 title (1 Ort 1001 000 1011 L) (cee mistide to le)	. ,	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contrib	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firr	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 2/8/2018 Principal occ	Full name of contributor	de '5201	Amount of In-kind contribution Contribution \$ description \$36,800.00 Media Buy Check if travel outside of Texas. Complete Schedule T. er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	s principal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	s employer/law firm (FOR JUDICIAL)	Law fire	m of contributor's spouse (if any) (FOR JUDICIAL)
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF f contributor is out-of-state PAC, please see instruction	THIS SCHED	OULE AS NEEDED additional reporting requirements.

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			1 Total pages Schedule A2:
Th	e Instruction Guide explains how to complete this form	1.	11
FILER NAMI			3 Filer ID (Ethics Commission Filers)
Joe Gonz			
TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ \$897,241.41
Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of . 9 In-kind contribution Contribution \$. description
Texas Justice & Safety Pac		\$2,616.00 Palm Cards	
2/8/2018	7 Contributor address; City; State; Zip Coc	le	- Faill Galus
	500 North Akard Street, Suite 3300 Dallas, TX	; 75201	Check if travel outside of Texas. Complete Schedule
	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIAL)(See Instructions)
Principal occ	cupation / Job title (FOR NON-JUDIOIAL) (Gee Institutions)		
: Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	ntor's job title (FOR JUDICIAL) (See Instructions)
4 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL
	(in the second of the second o		
6 If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	Full name of contributor)	Amount of . In-kind contribution
Data	Full name of contributor out-of-state FAO (10#		O talle diam & description
Date			Contribution \$ description \$50,000,00
Date 2/8/2018	Texas Justice & Safety Pac		\$50,000.00 Media Buy
	Texas Justice & Safety Pac Contributor address; City; State; Zip Co		\$50,000.00 Media Buy
2/8/2018	Texas Justice & Safety Pac Contributor address; City; State; Zip Co 500 North Akard Street, Suite 3300 Dallas,	TX; 75201	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Schedu
2/8/2018	Texas Justice & Safety Pac Contributor address; City; State; Zip Co	TX; 75201	AFO 000 00
2/8/2018 Principal oc	Texas Justice & Safety Pac Contributor address; City; State; Zip Co 500 North Akard Street, Suite 3300 Dallas,	TX; 75201 Employ	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Schedu
2/8/2018 Principal oc Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co 500 North Akard Street, Suite 3300 Dallas, coupation / Job title (FOR NON-JUDICIAL) (See Instructions) 's principal occupation (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions
2/8/2018 Principal oc Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co 500 North Akard Street, Suite 3300 Dallas, Coupation / Job title (FOR NON-JUDICIAL) (See Instructions)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions)
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co 500 North Akard Street, Suite 3300 Dallas, coupation / Job title (FOR NON-JUDICIAL) (See Instructions) 's principal occupation (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions)
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions)
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions)
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions)
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions)
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions
2/8/2018 Principal of Contributor	Texas Justice & Safety Pac Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, Excupation / Job title (FOR NON-JUDICIAL) (See Instructions) T's principal occupation (FOR JUDICIAL) T's employer/law firm (FOR JUDICIAL)	TX; 75201 Employ Contrib	\$50,000.00 Media Buy Check if travel outside of Texas. Complete Scheduler (FOR NON-JUDICIAL)(See Instructions) utor's job title (FOR JUDICIAL) (See Instructions

iuide explains how to complete this form EED IN-KIND POLITICAL CONTRIE of contributor	3 UTIONS \$	
of contributor	ETX; 75201	S \$897,241.41 3 Amount of 9 In-kind contribution description \$11,738.08 Direct Mail Check if travel outside of Texas. Complete Schedule
of contributor) ε 	3 Amount of Solution
of contributor) ε 	3 Amount of Solution
cas Justice & Safety Pac address; City; State; Zip Cod Akard Street, Suite 3300 Dallas, Be (FOR NON-JUDICIAL) (See Instructions)	E (Σ)	Contribution \$ description \$11,738.08 Direct Mail Check if travel outside of Texas. Complete Schedule
address; City; State; Zip Cod A Akard Street, Suite 3300 Dallas, The Re (FOR NON-JUDICIAL) (See Instructions)	TX; 75201	Check if travel outside of Texas. Complete Schedule
le (FOR NON-JUDICIAL) (See Instructions)	11 Employer	
		(FOR NON-JUDICIAL)(See Instructions)
eation (FOR JUDICIAL)	13 Contribut	
		or's job title (FOR JUDICIAL) (See Instructions)
irm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
firm of parent(s) (if any) (FOR JUDICIAL)	1	
of contributor)	Amount of . In-kind contribution Contribution \$. description
Justice & Safety Pac		C10 667 40 Direct Mail
or address; City; State; Zip Co	ode	\$19,667.40
	75201	Check if travel outside of Texas. Complete Schedul
		er (FOR NON-JUDICIAL)(See Instructions)
pation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAI
firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>	
	firm of parent(s) (if any) (FOR JUDICIAL) e of contributor out-of-state PAC (ID#: g Justice & Safety Pac or address; City; State; Zip Co n Akard Street, Suite 3300 Dallas, TX; title (FOR NON-JUDICIAL) (See Instructions) upation (FOR JUDICIAL) of firm (FOR JUDICIAL) of firm of parent(s) (if any) (FOR JUDICIAL)	firm of parent(s) (if any) (FOR JUDICIAL) e of contributor

Th	e Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2 FILER NAME	Ξ		3 Filer ID (Ethics Commission Filers)
Joe Gonzales			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ \$897,241.41
5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#: Texas Justice & Safety Pac)	8 Amount of . 9 In-kind contribution Contribution \$. description
			\$11,738.08 Direct Mail
2/7/2018	2/7/2018 7 Contributor address; City; State; Zip Code		
	500 North Akard Street, Suite 3300 Dallas, TX	(; 75201	Check if travel outside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of In-kind contribution Contribution \$ description
2/7/2018	Texas Justice & Safety Pac Contributor address; City; State; Zip Contributor		\$16,968.73 Direct Mail
	500 North Akard Street, Suite 3300 Dallas, TX	x· 75201	Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
lf.	ATTACH ADDITIONAL COPIES OF 1 contributor is out-of-state PAC, please see instruction		

SCHEDULE A2

. 2718.4				
Th	e Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:	
2 FILER NAME Joe Go			3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ \$897,241.41	
5 Date 2/6/2018	6 Full name of contributor out-of-state PAC (ID#:		8 Amount of 9 In-kind contribution description \$116,650.27 Media Buy & Production Costs Check if travel outside of Texas. Complete Schedule T.	
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firn	n of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor		Amount of In-kind contribution Contribution \$ description \$ \$31,175.27 Media Buy &	
2/6/2018	Contributor address; City; State; Zip Co. 500 North Akard Street, Suite 3300 Dallas, T		Production Costs Check if travel outside of Texas. Complete Schedule T.	
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
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if	ATTACH ADDITIONAL COPIES OF 1		•	

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Revised 9/8/2015

Th	ne Instruction Guide explains how to complete this form	1 Total pages Schedule A2:		
FILER NAMI	E	3 Filer ID (Ethics Commission Filers)		
	Joe Gonzales			
TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$ \$897,241.41	
Date 2/2/2018	6 Full name of contributor ☐ out-of-state PAC (ID#:	8 Amount of Contribution \$ 9 In-kind contribution description \$ 12,162.28 Direct Mail		
Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)		er (FOR NON-JUDICIAL)(See Instructions)	
Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)	
3 If contributo	or is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor		Amount of In-kind contribution description \$1,836.43 Direct Mail	
2/2/2018		, ТХ; 7520 <i>°</i>		
Principal oc	ccupation / Job title (FOR NON-JUDICIAL) (See Instructions)		ver (FOR NON-JUDICIAL)(See Instructions)	
Contributor	's principal occupation (FOR JUDICIAL)	Contrib	outor's job title (FOR JUDICIAL) (See Instructions)	
Contributor	r's employer/law firm (FOR JUDICIAL)	m of contributor's spouse (if any) (FOR JUDICIAL		
If contribut	or is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

2 FILER NAME		The Instruction Guide explains how to complete this form.					
	Ξ	3 Filer ID (Ethics Commission Filers)					
Joe (Gonzales						
TOTAL OF	F UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$ \$897,241.41				
5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#:	8 Amount of . 9 In-kind contribution Contribution \$. description					
1/26/2018	Texas Justice & Safety Pac 7 Contributor address; City; State; Zip Cod	\$11,779.14 Direct Mail					
	500 North Akard Street, Suite 3300 Dallas, T	X; 75201	Check if travel outside of Texas. Complete Schedule 1				
10 Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIAL)(See Instructions)				
12 Contributor's	principal occupation (FOR JUDICIAL)		utor's job title (FOR JUDICIAL) (See Instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	m of contributor's spouse (if any) (FOR JUDICIAL)				
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor		Amount of In-kind contribution Contribution \$ description				
	Texas Justice & Safety Pac		\$17,216.31 Direct Mail				
1/26/2018	Contributor address; City; State; Zip Co	de					
	500 North Akard Street, Suite 3300 Dallas,	TX; 75201	Check if travel outside of Texas. Complete Schedule				
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	yer (FOR NON-JUDICIAL)(See Instructions)				
Contributor's	s principal occupation (FOR JUDICIAL)	Contrib	outor's job title (FOR JUDICIAL) (See Instructions)				
Contributor's	s employer/law firm (FOR JUDICIAL)	Law fir	rm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributo	or is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
-							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

2/23/2018 LoneStar Media 7 Payee address; City; State; Zip Code \$2,976.88 7 Payee address; City; State; Zip Code 1011 N Frio Street San Antonio, TX 78207 (a) Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Advertising (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ges/Contract Labor	Travel Out Of District Other (enter a category not listed above)		
Complete CNILY if direct expenditure to benefit C/OH	Total pages Schedule F1:	2 FILER NAME Joe Gonzales		3 Filer ID (Ethics Commission Filers)		
S2,976.88 1011 N Frio Street San Antonio, TX 78207	Date 2/23/2018					
Second S	Amount (\$)	7 Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE Advertising Complete ONLY if direct expenditure to benefit C/OH Date 2/20/2018 Payee name Dr. Laura Barberena Dr. Laura Barberena Amount (\$) Payee address; City; State; Zip Code \$31,500.00 8314 Dawnwood Drive San Antonio, TX 78250 Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office sought Office held Date Payee name 1/30/2018 Amount (\$) Payee name 1/30/2018 LoneStar Medic Amount (\$) Payee address; City; State; Zip Code 1/30/2018 Category (See Categories listed at the top of this schedule) Date Payee name 1/30/2018 Candidate / Officeholder name Office sought Office held Category (See Categories listed at the top of this schedule) Date Payee name 1/30/2018 Candidate / Officeholder name Office sought Office held Category (See Categories listed at the top of this schedule) Date Payee address; City; State; Zip Code \$7,875.19 Ocategory (See Categories listed at the top of this schedule) Description Conclude fixed Complete Schedule Times Category (See Categories listed at the top of this schedule) Ocategory (See Categories listed at the top of this schedule) Office sought Office held Complete ONLY if direct Complete ONLY if	\$2,976.88	1011 N Frio Street San Antonio, TX 78207	7			
Complete ONLY if direct expenditure to benefit C/OH	3	(a) Category (See Categories listed at the top of this schedule)	` `	A CALL OF THE CANADA TO		
Complete ONLY if direct expenditure to benefit C/OH	PURPOSE					
Candidate / Officeholder name Office sought Office sought Office held Complete ONLY if direct candidate / Officeholder name Office sought Office sought Office held Office held Office held	OF Advertising Check if Austin, TX, officeholder living expens					
Amount (\$) Payee address; City; State; Zip Code \$3,500.00 8314 Dawnwood Drive San Antonio, TX 78250 Category (See Categories listed at the top of this schedule)	Complete ONLY if direct expenditure to benefit C/Ol		Office sought	Office held		
Amount (\$) Payee address; City; State; Zip Code \$3,500.00 8314 Dawnwood Drive San Antonio, TX 78250 Purpose OF EXPENDITURE Categories listed at the top of this schedule) Description Check if austin, TX, officeholder living expense	Date	Payee name				
\$3,500.00 8314 Dawnwood Drive San Antonio, TX 78250 PURPOSE OF EXPENDITURE Consulting	2/20/2018	Dr. Laura Barberena				
PURPOSE OF EXPENDITURE Consulting Consul	Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE Consulting Consul	\$3,500.00	8314 Dawnwood Drive San Antonio, TX	78250			
Complete ONLY if direct expenditure to benefit C/OH Date Payee name LoneStar Medi@ Amount (\$) Payee address; City; State; Zip Code \$7,875.19 Purpose OF EXPENDITURE Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH	OF		Check if travel o			
Amount (\$) Payee address; City; State; Zip Code \$7,875.19 1011 N Frio Street San Antonio, TX 78207 PURPOSE OF EXPENDITURE Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH City; State; Zip Code Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held			Office sought	Office held		
Amount (\$) Payee address; City; State; Zip Code \$7,875.19	Date	Payee name				
Amount (\$) Payee address; City; State; Zip Code \$7,875.19	1/30/2018	LoneStar Medi <i>0</i> ~				
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Printing Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held						
PURPOSE OF EXPENDITURE Printing Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held	\$7,875.19	1011 N Frio Street San Antonio, TX 7820	07			
PURPOSE OF EXPENDITURE Printing Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		Category (See Categories listed at the top of this schedule)	·			
Complete ONLY if direct Candidate / Officerolder name Cines stagn.	PURPOSE Check if Austin, TX, officeholder living					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			Office sought	Office held		
		ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS N	EEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

EXPENDITURE

Contract Labor

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Other (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Joe Gonzales 5 Payee name 4 Date **Robert Vargas** 1/31/2018 City; State; Zip Code 6 Amount (\$) 7 Payee address; 301 East Cevallos #137 San Antonio, TX 78204 \$1,750.00 (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense OF EXPENDITURE Fee Office held Office sought Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date **Robert Vargas** 2/13/2018 City; State; Zip Code Payee address; Amount (\$) 301 East Cevallos #137 San Antonio, TX 78204 \$1,750.00 Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office neid	
Date	Payee name			
2/23/2018	Sign Busters			
Amount (\$)	Payee address; City; State; Zip Code			
\$2,500.00	P.O. Box 241018 Sa Antonio, TX 78224			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Check if travel outside of Texa		
Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate / Officeholder name	Office sought	Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica		Onice Overnead/Hental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains	*	
1 Total pages Schedule F1:	2 FILER NAME Joe Gonzales		3 Filer ID (Ethics Commission Filers)
4 Date 2/16/2018	5 Payee name J4 Creations		•
6 Amount (\$) \$770.00	7 Payee address; City; State; Zip 5419 Eclipse Street Kirby, TX 7821		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sol	Check if travel o	outside of Texas. Complete Schedule T. in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 2/1/2018	Payee name Oscar Trejo		
Amount (\$)	Payee address; City; State; Zip) Code	
\$1,130.00	1064 Vance Jackson #100985	San Antonio, TX; 7	8201
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Fee		Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Рауее пате		
2/16/2018	Sign Busters		
Amount (\$) \$1,500.00	Payee address; City; State; Zin P.O. Box 241018 Sa Antonio, TX 7		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sol	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES O	OF THIS SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee **Event Expense** Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Printing Expense
Salaries/Wages/Contract Labor Legal Services 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 (Ethics Commission Filers) Joe Gonzales 4 Date 5 Payee name 2/8/2018 Sergio Cepeda 6 Amount (\$) 7 Payee address; City; State; Zip Code \$430.00 530 Belcross San Antonio, TX 78237 8 (a) Category (See Categories listed at the top of this schedule) (b) Description ____ Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Contract Labor Check if Austin, TX, officeholder living expense EXPENDITURE Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 2/21/2018 Rene Santos Amount (\$) Payee address: City; State; Zip Code \$594.00 3506 Stonehaven San Antonio, TX 78230 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF _ Check if Austin, TX, officeholder living expense **EXPENDITURE** Contract Labor Candidate / Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Payee name Date 2/7/2018 Stephen Osborn Amount (\$) Payee address; City; State; Zip Code \$667.50 5718 Timber Ben San Antonio, TX 78238 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Contract Labor Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense

Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politica		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense		pense	Transportation Equipment & Helated Expense Travel In District Travel Out Of District	
Cardiacte/Officeriolder/Politica Credit Card Payment	ai Committee	The Instruction Guide explai			Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 ELED M			omplete tilla form.	2 Files ID (Ethics Commission Files)	
	2 FILER N	Joe Gonzales			3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee na	ame			****	
2/14/2018		Rene Santos				
6 Amount (\$)	7 Payee a	ddress; City; State;	Zip Code			
\$400.00 3506 Stonehaven San Antonio, TX; 7823						
8	(a) Category	(See Categories listed at the top of this	schedule)	(b) Description		
PURPOSE				Check if travel or	utside of Texas. Complete Schedule T.	
OF EXPENDITURE	Contract	Labor		Check if Austin	n, TX, officeholder living expense	
EXPENDITORE						
9 Complete ONLY if direct	Candid	late / Officeholder name	-	Office sought	Office held	
expenditure to benefit C/O				omeo bought	Office Hold	
Date	Payee na	ame				
2/14/2018	Northeast Bexar County Democrats					
-,,						
Amount (\$) Payee address; City; State; Zip Code						
\$410.00	7122 Saı	n Pedro Ave Ste. 114 Sa	n Antoni	o, TX 78216		
	Category	(See Categories listed at the top of this	schedule)	Description		
PURPOSE				Check if travel ou	ıtside of Texas. Complete Schedule T.	
OF EXPENDITURE	Contribu	tion		Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct	Candid	late / Officeholder name		Office sought	Office held	
expenditure to benefit C/OF	1					
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	-					
2/7/2018		Maximileano	Lerma			
Amount (\$)	Payee a	ddress; City; State; 2	Zip Code			
\$415.00	407 E. N	lyrtle San Antonio, TX 7	8212			
	Category	(See Categories listed at the top of this	schedule)	Description		
PURPOSE				Check if travel ou	utside of Texas. Complete Schedule T.	
OF EXPENDITURE	Contract	Labor		Check if Austin	n, TX, officeholder living expense	
EN ENDITORIE	Contract	Luboi				
Complete ONLY if direct	Candid	late / Officeholder name		Office sought	Office held	
expenditure to benefit C/Oh		A CHICGHOIDE HATTE		Office sought	Office field	
	АТ	TACH ADDITIONAL COPIES	OF THIS	SCHEDULE AS NE	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donatio

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District

Contributions/Donations Made By Candidate/Officeholder/Political		ages/Contract Labor Other (enter a category not listed above)
credit Card Payment	The Instruction Guide explains how to c	omplete this form.
Total pages Schedule F1:	2 FILER NAME Joe Gonzales	3 Filer ID (Ethics Commission Filers)
Date 2/20/2018	5 Payee name Gabriella Campos	
Amount (\$)	7 Payee address; City; State; Zip Code	
\$372.50	2511 Irwin Dr. San Antonio, TX;	78222
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Contract Labor	Check if Austin, TX, officeholder living expense
Complete <u>QNLY</u> if direct expenditure to benefit C/Oł	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
2/21/2018	Veanna Olivares	
Amount (\$)	Payee address; City; State; Zip Code	
\$372.50	4022 Salado Crest San Antonio,	TX; 78222
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule)		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name DH	Office sought Office held
Date	Payee name	
2/23/2018	Maximileano Lerma	
Amount (\$)	Payee address; City; State; Zip Code	
\$397.50	407 E. Myrtle San Antonio, TX 78212	
	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
PURPOSE OF		Check if Austin, TX, officeholder living expense
EXPENDITURE	Contract Labor	
Complete ONLY if direct expenditure to benefit C/C		Office sought Office held
	OLI DE TOUR DE CONTROL DE TOUR	C COMEDIN E AS NEEDED
	ATTACH ADDITIONAL COPIES OF TH	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Printing Expense Salaries/Wages/Contract Labor Other (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Joe Gonzales 5 Payee name 4 Date Jenna Scott 2/8/2018 City; State; Zip Code 7 Payee address; 6 Amount (\$) 311 Club Dr San Antonio, TX 78201 \$300.00 (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense Contract Labor OF EXPENDITURE Office held Office sought Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date **Tomatillos Cafe** 2/24/2018 City; State; Zip Code Payee address; Amount (\$) 3210 Broadway San Antonio, TX 78209 \$347.18 Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense EXPENDITURE Food Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date Prestige Printing 2/7/2018 City; State; Zip Code Payee address; Amount (\$) 8 Burwood Ln San Antonio, TX 78216 \$364.80 Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense OF **EXPENDITURE** Printing Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out Of District

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Legal Services 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 (Ethics Commission Filers) Joe Gonzales 4 Date 5 Payee name 2/14/2018 Office Depot 6 Amount (\$) City; State; Zip Code 7 Payee address; \$275.42 150 N Crossroads Blvd Balcones Heights, TX 78201 (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Office Supplies ☐ Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought 9 Complete ONLY if direct Office held expenditure to benefit C/OH Date Payee name 2/7/2018 **Gabriella Campos** Amount (\$) Payee address; City; State; Zip Code \$295.00 2511 Irwin Dr. San Antonio, TX; 78222 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Contract Labor Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Payee name Date 2/7/2018 Veanna Alvares Amount (\$) Payee address; City; State; Zip Code \$295.00 4022 Salado Crest San Antonio, TX; 78222 Category (See Categories listed at the top of this schedule) Description **PURPOSE** __ Check if travel outside of Texas. Complete Schedule T. OF ☐ Check if Austin, TX, officeholder living expense EXPENDITURE Contract Labor Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

counting/Banking nsulting Expense ntributions/Donations Made B	Gift/Awards/Memorials Expense Printin	g Expense Travel in District g Expense Travel Out Of District other (enter a category not listed above)				
andidate/Officeholder/Politica edit Card Payment	d Committee Legal Services Salari The Instruction Guide explains how					
Ochodulo E1:	O SHED NAME	3 Filer ID (Ethics Commission Filers)				
otal pages Schedule F1:	Joe Gonzales					
Date 2/5/2018	5 Payee name ROBODIAL					
	7 Payee address; City; State; Zip Coo	le				
Amount (\$) 224.48	Falls Church, VA 22046					
224.40						
	(a) Category (See Categories listed at the top of this schedule	(b) Description Check if travel outside of Texas. Complete Schedule T.				
PURPOSE		Check if Austin, TX, officeholder living expense				
OF	Advertising	Check if Austin, 1X, oncome as a many				
EXPENDITURE						
O ONII V if direct	Candidate / Officeholder name	Office sought Office held				
Complete ONLY if direct expenditure to benefit C/C	DH					
Date	Payee name					
2/1/2018	Northwest Democ	rats				
Amount (\$)	Payee address; City; State; Zip Code					
	5403 Jackwood Dr. San Anto	5403 Jackwood Dr. San Antonio, TX; 78238				
\$250.00	3403 Jackwood 51. Gaill and					
	Category (See Categories listed at the top of this schedu	le) Description Check if travel outside of Texas. Complete Schedule T.				
PURPOSE		Check if Austin, TX, officeholder living expense				
OF EXPENDITURE	Superbowl Sponsorship	Cilcox a Massay				
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held				
expenditure to benefit C/	ЮН					
Date	Payee name					
	Fasabaak					
2/7/2018 Amount (\$)	Facebook Payee address; City; State; Zip C	ode				
	1 4/2					
\$250.00	1 Hackerway Menlo, CA 94025					
	Category (See Categories listed at the top of this sched	dule) Description Check if travel outside of Texas. Complete Schedule T.				
PURPOSE		Check if Tavel dustine of Texas. Complete estimates in Check if Austin, TX, officeholder living expense				
OF EXPENDITURE	Advertising	Clieda ii risoliii) 113 Villeanii V				
EXPENDITORL	_					
EXPENDITORE						
	. Candidate / Officeholder name	Office sought Office held				
Complete ONLY if direct expenditure to benefit (ct Candidate / Officeholder name C/OH	Office sought Office held				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Joe Gonzales 5 Payee name 1/29/2018 Walmart City; State; Zip Code 6 Amount (\$) 7 Payee address; 8030 Bandera Rd San Antonio, TX 78250 \$193.19 (b) Description 8 (a) Category (See Categories listed at the top of this schedule) __ Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Food Check if Austin, TX, officeholder living expense OF **EXPENDITURE** Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Pavee name Date 2/7/2018 Fedex City; State; Zip Code Amount (\$) Payee address; \$196.20 3740 NW Loop 410 San Antonio, TX 78229 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense OF EXPENDITURE Office Overhead Office held Complete ONLY if direct Candidate / Officeholder name Office sought expenditure to benefit C/OH Date Payee name 2/21/2018 Office Depot Amount (\$) Payee address; City; State; Zip Code \$221.25 2321 SW Military Dr San Antonio, TX 78224 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF

Office held

Check if Austin, TX, officeholder living expense

Office sought

EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

Office Supplies

Candidate / Officeholder name

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Legal Services 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 (Ethics Commission Filers) Joe Gonzales 4 Date 5 Pavee name 2/12/2018 Deanna Duran 6 Amount (\$) City; State; Zip Code 7 Payee address; \$170.00 5450 Bowley Rd Apt #119 San Antonio, TX; 78280 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 __ Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Contract Labor __ Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name 2/13/2018 The Links Foundation Amount (\$) Pavee address: City; State; Zip Code \$170.00 1200 MASSACHUSETTS AVE, NW WASHINGTON, DC 20005 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense **EXPENDITURE** Contribution Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 2/5/2018 Facebook Amount (\$) City; State; Zip Code Payee address; \$175.00 1 Hackerway Menlo, CA 94025 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF EXPENDITURE Licheck if Austin, TX, officeholder living expense Advertising Office held Candidate / Officeholder name Complete ONLY if direct Office sought expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense omae Evnense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Credit Card Payment Total pages Schedule F1:	The Instruction Guide explain 2 FILER NAME Joe Gonzales 5 Payee name Max's Wine Di	s how to complete this form. 3 Filer ID (Ethics Commission Filers)
Total pages Schedule F1:	5 Payee name	3 Filer ID (Ethics Commission Filers)
	5 Payee name	
Date 1/29/2018	IVIAX 3 VVIIIE DI	ve
Amount (\$)	7 Payee address; City; State; Z	ip Code
	340 E Basse Rd Ste 101 San Anto	onio, TX 78209
3	(a) Category (See Categories listed at the top of this	
PURPOSE		Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Food	Check if Austin, TX, officeholder living expense
EXPENDITORE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
2/20/2018	Teamwork Lo	cksmith
Amount (\$)	Payee address; City; State;	Zip Code
\$139.00	166 N Loop 1604 E #110 San An	tonio, TX 78232
	Category (See Categories listed at the top of this	
PURPOSE		Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Office Overhead	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
2/21/2018	Costco	
Amount (\$)	Payee address; City; State;	Zip Code
\$166.70	5611 UTSA BLVD San Antonio,	TX 78249
	Category (See Categories listed at the top of thi	
PURPOSE		Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Food	Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/O	H	
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Printing Expense Salaries/Wages/Contract Labor Legal Services 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 (Ethics Commission Filers) Joe Gonzales 4 Date 5 Payee name 1/29/2018 Jenna Scott 6 Amount (\$) 7 Payee address; City; State; Zip Code \$110.00 311 Club Dr San Antonio, TX 78201 8 (a) Category (See Categories listed at the top of this schedule) (b) Description ___ Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Contract Labor Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 2/20/2018 Down on Grayson Amount (\$) Payee address; City; State; Zip Code \$118.00 303 E Grayson St San Antonio, TX 78215 Category (See Categories listed at the top of this schedule) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Food Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 2/5/2018 **Ezequel Garza** Amount (\$) Payee address; City; State; Zip Code \$120.00 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EXPENDITURE Contract Labor Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District

Consulting Expense Food/Beverage Expense Polling EX Contributions/Donations Made By Gift/Awards/Memorials Expense Printing EX Candidate/Officeholder/Political Committee Legal Services Salaries/M					
Credit Card Payment		ide explains how to co	omplete this form.		
Total pages Schedule F1:	2 FILER NAME Joe Gonza	ales		3 Filer ID (Ethics Commission Filers	
Date 2/7/2018	5 Payee name Walma	art			
Amount (\$)		State; Zip Code			
\$88.37	3418 E Southcross San A	Intonio, TX 7822	3		
3	(a) Category (See Categories listed at t	the top of this schedule)	(b) Description	A Life of Tours Complete School de T	
PURPOSE OF EXPENDITURE	Food		1 =	outside of Texas. Complete Schedule T. in, TX, officeholder living expense	
• Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder na	ıme	Office sought	Office held	
Date	Payee name				
1/30/2018	Deanr	na Duran			
Amount (\$) Payee address; City; State; Zip Code					
\$95.00	5450 Bowley Rd Apt	t #119 San Ar	ntonio, TX; 782	80	
	Category (See Categories listed at	t the top of this schedule)	Description	outside of Texas. Complete Schedule T.	
PURPOSE				in, TX, officeholder living expense	
OF EXPENDITURE	Contract Labor			,	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder na H	ame	Office sought	Office held	
Date	Payee name				
2/9/2018	Sama	antha Parma			
Amount (\$)		y; State; Zip Code			
\$95.00					
PURPOSE	Category (See Categories listed a	at the top of this schedule)	Description Check if trave	l outside of Texas. Complete Schedule T.	
OF EXPENDITURE	Contract Labor		Check if Aus	stin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder	name	Office sought	Office held	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarias/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
Other (enter a category not listed above)

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	y Gift/Awards/Memorials Expense Printing	Expense Travel Out Of District Wages/Contract Labor Other (enter a category not listed above) complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Joe Gonzales	3 Filer ID (Ethics Commission Filers)		
4 Date 1/31/2018	5 Payee name Walmart			
6 Amount (\$) \$77.46	7 Payee address; City; State; Zip Code 8030 Bandera Rd. San Antonio, TX 782	50		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FOOD	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		
Date 2/20/2018	Payee name Valeria Valera			
Amount (\$)	Payee address; City; State; Zip Code			
\$80.00	4143 Winesap Dr. San Antonio,	TX; 78222		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
2/20/2018	Verizon Wireless			
Amount (\$)	Payee address; City; State; Zip Code			
\$88.20	1726 Fredericksburg Rd. San Antonio,	TX 78201		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF TH	S SCHEDULE AS NEEDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Legal Services 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 (Ethics Commission Filers) Joe Gonzales 4 Date 5 Payee name 1/30/2018 Cindy Vela-Flores 6 Amount (\$) 7 Payee address; City; State; Zip Code \$75.00 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. OF Contract Labor Check if Austin, TX, officeholder living expense EXPENDITURE Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 2/12/2018 Home Depot Amount (\$) Payee address; City; State; Zip Code \$75.34 435 Sunset Rd San Antonio, TX 78209 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Check if travel outside of Texas, Complete Schedule T. OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Office Overhead Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 2/23/2018 Jerusalem Grill Amount (\$) Payee address; City; State; Zip Code \$77.30 3259 Wurzbach Rd. San Antonio, TX 78238 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EXPENDITURE Food Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Exper

Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political	Food/Beverage Expense Polling Expense By Gift/Awards/Memorials Expense Printing Expense		ense	Travel In District Travel Out Of District Other (enter a category not listed above)	
Credit Card Payment	"	The Instruction Guide expl		-	
1 Total pages Schedule F1:	2 FILER NAI	ME Joe Gonzales			3 Filer ID (Ethics Commission Filers)
4 Date 2/20/2018	5 Payee nam	ne Tomatillos C	afe		
6 Amount (\$)	7 Payee add				
\$53.52	3210 Broa	adway San Antonio, T	ıx 78209		
8	(a) Category	(See Categories listed at the top of th	his schedule)	(b) Description	wheirla of Tayae Complete Coheck to T
PURPOSE	Eag				outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
OF EXPENDITURE	Food			Crieck if Aust	and substantial
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ate / Officeholder name		Office sought	Office held
Date	Payee nan				
2/13/2018		Mi Tierra			
Amount (\$)	Payee add		•		
\$62.00	218 Prod	uce Row San Antonio	o, TX 78207	7	
	Category	(See Categories listed at the top of t	this schedule)	Description Check if travel of	outside of Texas. Complete Schedule T.
PURPOSE OF	_				stin, TX, officeholder living expense
EXPENDITURE	Food				
Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought	Office held
Date	Payee na	ıme			
2/16/2018		La Botana			
Amount (\$)	Payee ad		; Zip Code		
\$70.00	1401 W	Hildebrand Ave San A	Antonio, ፐኦ	(78201	
	Category	(See Categories listed at the top of	f this schedule)	Description	Lauthida of Toyan Camulata Cabadala T
PURPOSE					el outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense
OF EXPENDITURE	Food			LI Check if Aus	, Ontolione living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C		date / Officeholder name		Office sought	Office held
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Joe Gonzales 4 Date 5 Payee name 2/2/2018 Almuya-Silvine-Detailing 6 Amount (\$) City; State; Zip Code 7 Payee address; \$50.00 (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** __ Check if Austin, TX, officeholder living expense Contract Labor **EXPENDITURE** Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 1/29/2018 Mi Tierra Amount (\$) Payee address; City; State; Zip Code \$52.00 218 Produce Row San Antonio, TX 78207 Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense EXPENDITURE Food Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date 1/31/2018 Chachos Amount (\$) City; State; Zip Code Payee address; \$53.15 6757 Poss Road San Antonio, TX 78238 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF EXPENDITURE Check if Austin, TX, officeholder living expense Food Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED