





Official Public Records of
Harris County
Stan Stanart
County Clerk

Campaign Finance Report

		 COUNTY CLERK HARRIS COUNTY, TEXAS
FileNo:	2017255	
Received By Clerk:	7/17/2017	
File Date:	July 17, 2017	
Office:	Justice Of The Peace Pct. 1, Place 2	
Candidate:	Patronella, David M.	
Treasurer:	Fritsche, T. M.	
Category:	Contributions And Expenditures	
Delivered By:	Personal Appearance	
Type:	COR	

Harris County No Fee

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

2017255

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 39
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR NICKNAME	FIRST DAVID LAST	MI M. SUFFIX
	PATRONELLA		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. BOX 10283, HOUSTON, TX 77206		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (713)	PHONE NUMBER 274-0600	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	FIRST T. LAST	MI M. SUFFIX
	FRITSCH		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1001 FANNIN, HOUSTON, TX 77002		
8 CAMPAIGN TREASURER PHONE	AREA CODE (713)	PHONE NUMBER 651-0111	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 01 / 01 / 2017 THROUGH 06 / 30 / 2017		
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (If any) HARRIS COUNTY JUSTICE OF THE PEACE 1-2		13 OFFICE SOUGHT (If known) SAME
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME **DAVID M. PATRONELLA** 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

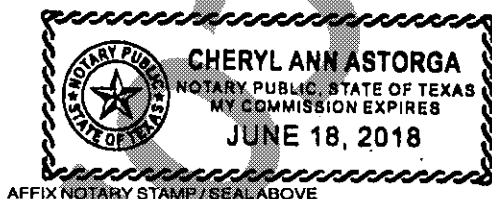
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 440.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 20,215.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,075.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



David M. Patronella

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said DAVID M. PATRONELLA, this the 14th day of July, 2017, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

19 FILER NAME DAVID M. PATRONELLA		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS	NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 20,215.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,075.07
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 1 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 03/16/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ DARRYL HEINE 6 Contributor address; City; State; Zip Code 1500 FAREWELL #31 BRENHAM, TX 77833	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ HAA BETTER GOVERNMENT FUND Contributor address; City; State; Zip Code 4810 WESTWAY PARK BLVD, HOUSTON, TX 77041	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ BERNARD L. HEBINCK Contributor address; City; State; Zip Code 2020 SW FREEWAY, STE 225, HOUSTON, TX 77098	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm HEBINCK & ALTER, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 2 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: HELEN ONCKEN 6 Contributor address; City; State; Zip Code 1049 CHESHIRE LN, HOUSTON, TX 77018	7 Amount of contribution (\$) \$ 150.00
8 Contributor's principal occupation RETIRED		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: RICKY A RAVEN Contributor address; City; State; Zip Code 4007 OAK SHADOWS CT, SUGAR LAND, TX 77479	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: JEFFREY HALL Contributor address; City; State; Zip Code 2158 BRIARGLEN DR, HOUSTON, TX 77027	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation APARTMENT MANAGEMENT		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 3 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ RODDRICK D. MURRAY 6 Contributor address; City; State; Zip Code 1300 N SAM HOUSTON PKWY E #100, HOUSTON, TX 77032	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ GREG WEINBERG Contributor address; City; State; Zip Code 2800 POST OAK BLVD, 57th FL, HOUSTON, TX 77056	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm ROBERTS, MARKEL, WEINBERG, BUTLER, HAILEY, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ SCOTT MARKOWITZ Contributor address; City; State; Zip Code 5610 SW FREEWAY, STE 104, HOUSTON, TX 77057	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm MARKOWITZ LAW FIRM		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 4 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ BRIAN CWEREN 6 Contributor address; City; State; Zip Code 3311 RICHMOND AVE, STE 305, HOUSTON, TX 77098	7 Amount of contribution (\$) \$ 500.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm LAW OFFICE OF BRIAN CWEREN		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ CHARLES E. ARMSTRONG Contributor address; City; State; Zip Code 5000 MONTROSE BLVD #22C, HOUSTON, TX 77006	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ M. H. CERSONSKY Contributor address; City; State; Zip Code 1770 ST JAMES PLACE #150, HOUSTON, TX 77056	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm CERSONSKY, ROSEN & GARCIA, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 5 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: LIAS J. STEEN 6 Contributor address; City; State; Zip Code 3 OAKLAWN DR, HOUSTON, TX 77024	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: JOHN A. HUTCHISON, III Contributor address; City; State; Zip Code 2500 EAST TC JESTER BLVD #675, HOUSTON, TX 77008	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation FORMER JUDGE/MEDIATOR		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: WILLIAM R. SUDELA Contributor address; City; State; Zip Code 3730 BELLEFONTAINE, HOUSTON, TX 77025	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm CRADY JEWETT & McCULLEY, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 6 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ MARTIN D. BEIRNE 6 Contributor address; City; State; Zip Code 1300 POST OAK BLVD, 25th FLOOR, HOUSTON, TX 77019	7 Amount of contribution (\$) \$ 250.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm AKERMAN, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ HOOVER SLOVACEK, LLP Contributor address; City; State; Zip Code 5051 WESTHEIMER, STE 1200, HOUSTON, TX 77056	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation LAW FIRM		Contributor's job title
Contributor's employer/law firm HOOVER SLOVACEK, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ FLOYD WHITLEY Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation RETIRED		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 7 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: SCOTT WIZIG 6 Contributor address; City; State; Zip Code PO BOX 741109, HOUSTON, TX 77274	7 Amount of contribution (\$) \$ 500.00
8 Contributor's principal occupation PROPERTY MANAGEMENT		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/25/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: STEPHEN E. PRICE Contributor address; City; State; Zip Code 2829 SHOAL CREST AVE, AUSTIN, TX 78705	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm FREEDMAN & PRICE, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/25/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: STANFORD S. BOYD Contributor address; City; State; Zip Code 2101 LOUISIANA ST, HOUSTON, TX 77002	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm PATTERSON, BOYD & LOWERY, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/25/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: RODERICK O. GIBSON	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code 416 WESTHEIMER RD, HOUSTON, TX 77006		
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm RODERICK O. GIBSON, ATTORNEY AT LAW		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/25/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: GEORGE S. LITTELL	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 5300 MEMORIAL DR, STE 375, HOUSTON, TX 77007		
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/25/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: JACK O'BOYLE	Amount of contribution (\$) \$ 250.00
Contributor address; City; State; Zip Code PO BOX 815369, DALLAS, TX 75381		
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm JACK O'BOYLE & ASSOCIATES		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 9 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 04/27/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ MARCHIS G. ROBINSON 6 Contributor address; City; State; Zip Code 4203 YOAKUM #310, HOUSTON, TX 77006	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm ROBINSON LAW GROUP, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 04/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ DAN HINES Contributor address; City; State; Zip Code 27 DARTMOOR ST, SUGAR LAND, TX 77479	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation BUSINESS OWNER		Contributor's job title
Contributor's employer/law firm RESOURCE STAFFING		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ PATRICK C. O'CONNOR Contributor address; City; State; Zip Code 2318 WILLOWBY DR, HOUSTON, TX 77008	Amount of contribution (\$) \$ 1,000.00
Contributor's principal occupation TAX CONSULTANT		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 10 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: PATRICIA DAY 6 Contributor address; City; State; Zip Code 2432 NOTTINGHAM ST, HOUSTON, TX 77005	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation RETIRED ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: DON DeGRASSE Contributor address; City; State; Zip Code 1800 BERING DR, STE 1000, HOUSTON, TX 77057	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm DeGRASSE LAW FIRM, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: MARC GROSSBERG Contributor address; City; State; Zip Code 300 ST JOSEPH PKWY #417, HOUSTON, TX 77002	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm THOMPSON KNIGHT, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 11 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ MICHAEL A. MORIARTY 6 Contributor address; City; State; Zip Code 404 HEIGHTS BLVD, HOUSTON, TX 77007	7 Amount of contribution (\$) \$ 200.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm MORIARTY LAW FIRM		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ CHARLES G. TRACY Contributor address; City; State; Zip Code 2715 SUNSET BLVD, HOUSTON, TX 77005	Amount of contribution (\$) \$ 1,000.00
Contributor's principal occupation CPA		Contributor's job title
Contributor's employer/law firm CHARLES G. TRACY, CPA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ TOTZ ELLISON & TOTZ, PC Contributor address; City; State; Zip Code 2211 NORFOLK, STE 510, HOUSTON, TX 77098	Amount of contribution (\$) \$ 1,000.00
Contributor's principal occupation LAW FIRM		Contributor's job title
Contributor's employer/law firm TOTZ ELLISON & TOTZ, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 12 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2017	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC ID#: C00027342 IBEW PAC VOLUNTARY FUND 6 Contributor address; City; State; Zip Code 900 SEVENTH ST, NW, WASHINGTON, DC 20001	7 Amount of contribution (\$) \$ 500.00
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ JOE F. WHEAT Contributor address; City; State; Zip Code 4544 POST OAK PLACE DR, STE 350, HOUSTON, TX 77027	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm JOE F. WHEAT, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ RUSSELL J. MILLER Contributor address; City; State; Zip Code 2204 LOUISIANA, 2nd FLOOR, HOUSTON, TX 77002	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ACCOUNTANT		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 13 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/12/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: THOMAS M. WHITWORTH 6 Contributor address; City; State; Zip Code 1516 MICHIGAN, HOUSTON, TX 77006	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm THOMAS M. WHITWORTH, ATTORNEY AT LAW		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: PHILOAN MARIE TRAN Contributor address; City; State; Zip Code 54 SUGAR CREEK CTR BLVD #315, SUGAR LAND, TX 77005	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm PHILOAN M. TRAN, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: ANDREW McCORMICK & LAURIE LANDRY MUNOZ Contributor address; City; State; Zip Code 4950 BISSENET, STE A, BELLAIRE, TX 77401	Amount of contribution (\$) \$ 200.00
Contributor's principal occupation ATTORNEYS		Contributor's job title
Contributor's employer/law firm McCORMICK LANDRY MUNOZ, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 14 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/12/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ JAMES WEST 6 Contributor address; City; State; Zip Code 1130 RICHARDS DR, FRIENDSWOOD, TX 77546	7 Amount of contribution (\$) \$ 250.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ CHARLES & PAULINE PATRONELLA Contributor address; City; State; Zip Code 10501 E WILDWIND CIRCLE, THE WOODLANDS, TX 77380	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation RETIRED		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ REX L. KESLER Contributor address; City; State; Zip Code 2311 CANAL ST, STE 304, HOUSTON, TX 77003	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm REX L. KESLER, ATTORNEY AT LAW		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 15 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/12/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: PAULINE CHUNG 6 Contributor address; City; State; Zip Code 10709 OLD COACH LN, HOUSTON, TX 77024	7 Amount of contribution (\$) \$ 500.00
8 Contributor's principal occupation RESTAURANT OWNER		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: PLUMBERS LOCAL UNION NO. 68 Contributor address; City; State; Zip Code PO BOX 8746, HOUSTON, TX 77249-8746	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: LINEBARGER GOGGAN BLAIR & SAMPSON, LLP Contributor address; City; State; Zip Code PO BOX 17428, AUSTIN, TX 78760	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation LAW FIRM		Contributor's job title
Contributor's employer/law firm LINEBARGER GOGGAN BLAIR & SAMPSON, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 16 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/23/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ JOSE JAVIER ANZIANI 6 Contributor address; City; State; Zip Code 1102 W AVE, STE 200, AUSTIN, TX 78701	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm FREEDMAN & PRICE, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ PHILIP KLOSOWSKY Contributor address; City; State; Zip Code 14015 SW FRWY, STE 14, SUGAR LAND, TX 77478	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm KLOSOWSKY LAW OFFICE		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ DR JAN PER BERGMANSON Contributor address; City; State; Zip Code 2046 McCLENDON ST, HOUSTON, TX 77030	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation OPTOMETRIST		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 17 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/24/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: MICHAEL BOTSON	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code 2023 WAKEFIELD DR, HOUSTON, TX 77018		
8 Contributor's principal occupation COLLEGE INSTRUCTOR		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: LOUIS MACEY	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 1717 ST JAMES PLACE, STE 118, HOUSTON, TX 77056		
Contributor's principal occupation INVESTMENTS		Contributor's job title
Contributor's employer/law firm LOUIS MACEY INVESTMENTS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: JACK & KAREN KEY	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 1046 CHESHIRE, HOUSTON, TX 77018		
Contributor's principal occupation RETIRED		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 18 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 05/24/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ FRANK & RITA PATRONELLA 6 Contributor address; City; State; Zip Code 3982 RUPE HUFFMAN RD, LONGVIEW, TX 75605	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation RETIRED		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ SAMUEL COLLINS Contributor address; City; State; Zip Code 3730 KIRBY DR #777, HOUSTON, TX 77098	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ NATALIE HERZOG Contributor address; City; State; Zip Code 2006 BROOKTREE DR, HOUSTON, TX 77008	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation PROPERTY MANAGER		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)****SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:
19 of 25**2** FILER NAME

DAVID M. PATRONELLA

3 Filer ID (Ethics Commission Filers)**4** Date

05/24/2017

5 Full name of contributor

LAWRENCE KAGAN

☐ out-of-state PAC ID#:**6** Contributor address;

City; State; Zip Code

8801 KNIGHT RD, HOUSTON, TX 77054

7 Amount of contribution (\$)

\$ 250.00

8 Contributor's principal occupation

REAL ESTATE

9 Contributor's job title**10** Contributor's employer/law firm**11** Law firm of contributor's spouse (if any)**12** If contributor is a child, law firm of parent(s) (if any)

Date

05/24/2017

Full name of contributor

DOMINIQUE VARNER

☐ out-of-state PAC ID#:

Contributor address;

City; State; Zip Code

8007 EDMOOR DR, HOUSTON, TX 77036

Amount of contribution (\$)

\$ 250.00

Contributor's principal occupation

ATTORNEY

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

05/24/2017

Full name of contributor

ERNEST BARRIENTOS

☐ out-of-state PAC ID#:

Contributor address;

City; State; Zip Code

1714 MERCOAL DR, SPRING, TX 77386

Amount of contribution (\$)

\$ 500.00

Contributor's principal occupation

ATTORNEY

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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
(JUDICIAL)****SCHEDULE A(J)1**

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 20 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 06/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ ROBERT V. ROSENBERG 6 Contributor address; City; State; Zip Code 5606 RUTHERGLENN DR, HOUSTON, TX 77096	7 Amount of contribution (\$) \$ 75.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm LAW OFFICE OF ROBERT V. ROSENBERG		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ MARC GROSSBERG Contributor address; City; State; Zip Code 300 ST JOSEPH PKWY, UNIT 417, HOUSTON, TX 77002	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm THOMPSON KNIGHT LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ BRIAN E. STALEY Contributor address; City; State; Zip Code 4529 HUMMINGBIRD ST, HOUSTON, TX 77035	Amount of contribution (\$) \$ 100.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm MIDLAND CREDIT MANAGEMENT, INC.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 21 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 06/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ ROBERT CHAN TYSOR 6 Contributor address; City; State; Zip Code 7155 OLD KATY RD, STE D, HOUSTON, TX 77024	7 Amount of contribution (\$) \$ 200.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm SCOTT & ASSOCIATES		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ RANNEY McDONOUGH Contributor address; City; State; Zip Code 5625 SCHUMACHER, HOUSTON, TX 77057	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ENGINEER		Contributor's job title
Contributor's employer/law firm McDONOUGH ENGINEERING CORP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ D. BRENT WELLS Contributor address; City; State; Zip Code 440 LOUISIANA, STE 718, HOUSTON, TX 77002	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm WELLS & CUELLAR, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 06/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ VINCENT BUSTAMANTE 6 Contributor address; City; State; Zip Code 3806 DRAKE, HOUSTON, TX 77005	7 Amount of contribution (\$) \$ 250.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ BASU LAW FIRM Contributor address; City; State; Zip Code PO BOX 550496, HOUSTON, TX 77255	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation LAW FIRM		Contributor's job title
Contributor's employer/law firm BASU LAW FIRM		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ CAROL JUE Contributor address; City; State; Zip Code 19 RILLWOOD PLACE, THE WOODLANDS, TX 77382	Amount of contribution (\$) \$ 300.00
Contributor's principal occupation RESTAURANT OWNER		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 23 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 06/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ EVA NOVOTNY 6 Contributor address; City: State: Zip Code 7 MARTIN CT, HOUSTON, TX 77055	7 Amount of contribution (\$) \$ 500.00
8 Contributor's principal occupation TAX CONSULTANT		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ HOLLY FULKERSON Contributor address; City: State: Zip Code 448 W 19th ST, STE 171, HOUSTON, TX 77008	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm FULKERSON & WING, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ LISA WATKINS Contributor address; City: State: Zip Code 24 GREENWAY PLAZA, STE 1710, HOUSTON, TX 77046	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation ATTORNEY		Contributor's job title
Contributor's employer/law firm WATKINS & WATKINS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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 (JUDICIAL)

SCHEDULE A(J)1

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 24 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 06/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: MARVIN B. PETERSON 6 Contributor address; City; State; Zip Code 5000 MONTROSE #16A, HOUSTON, TX 77006	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title
10 Contributor's employer/law firm LAW OFFICE OF MARVIN B. PETERSON		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: STEVENSON & MURRAY ATTORNEYS AT LAW Contributor address; City; State; Zip Code 24 GREENWAY PLAZA, STE 750, HOUSTON, TX 77046	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation LAW FIRM		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: ERIC SAMET Contributor address; City; State; Zip Code 4987 VALKEITH, HOUSTON, TX 77096	Amount of contribution (\$) \$ 500.00
Contributor's principal occupation REAL ESTATE		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 25 of 25
2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date 06/21/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: FRANK DIMARIA 6 Contributor address; City; State; Zip Code 5A W SHADY LN, HOUSTON, TX 77063	7 Amount of contribution (\$) \$ 100.00
8 Contributor's principal occupation BUSINESS OWNER		9 Contributor's job title
10 Contributor's employer/law firm SOUTH TEXAS CARPETS & FINE FLOORS		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: LYNN S. WYATT Contributor address; City; State; Zip Code 3638 MEADOW LAKE LN, HOUSTON, TX 77027	Amount of contribution (\$) \$ 250.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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.

1 Total pages Schedule F1: 1 of 8		2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 01/31/2017		5 Payee name TONY'S RESTAURANT			
6 Amount (\$) \$ 47.50		7 Payee address; City; State; Zip Code 3755 RICHMOND AVE, HOUSTON, TX 77046			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 02/20/2017		Payee name CIAO BELLO			
Amount (\$) \$ 58.70		Payee address; City; State; Zip Code 5161 SAN FELIPE, HOUSTON, TX 77056			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/01/2017		Payee name U.S. POSTMASTER			
Amount (\$) \$ 46.00		Payee address; City; State; Zip Code 3816 N. SHEPHERD, HOUSTON, TX 77018			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) SOLICITATION/FUNDRAISING EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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.

1 Total pages Schedule F1: 2 of 8		2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 03/01/2017		5 Payee name TEXAS DEMOCRATIC WOMEN			
6 Amount (\$) \$ 150.00		7 Payee address; City; State; Zip Code 5823 DOLIVER, HOUSTON, TX 77057			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) SPONSORSHIP		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/31/2017		Payee name DELUXE			
Amount (\$) \$ 180.70		Payee address; City; State; Zip Code PO BOX 742572, CINCINNATI, OH 45274-2572			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) CHECK STOCK		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/07/2017		Payee name U.S. POSTMASTER			
Amount (\$) \$ 343.00		Payee address; City; State; Zip Code 1500 HADLEY, HOUSTON, TX 77002			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) SOLICITATION/FUNDRAISING EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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.

1 Total pages Schedule F1: 3 of 8		2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 04/12/2017		5 Payee name J & N ENTERPRISES			
6 Amount (\$) \$1,585.86		7 Payee address; City; State; Zip Code 2015 W 34th ST, STE F, HOUSTON, TX 77018			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) SOLICITATION/FUNDRAISING EXPENSE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/13/2017		Payee name UNION KITCHEN			
Amount (\$) \$ 87.90		Payee address; City; State; Zip Code 3452 ELLA DR, HOUSTON, TX 77018			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/14/2017		Payee name TEXAS ASSOCIATION OF COUNTIES			
Amount (\$) \$ 60.00		Payee address; City; State; Zip Code PO BOX 2131, AUSTIN, TX 78768			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) JPCA MEMBERSHIP FEES		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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/Memorabilia 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.

1 Total pages Schedule F1: 4 of 8		2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 04/20/2017		5 Payee name OFFICE DEPOT			
6 Amount (\$) \$ 14.49		7 Payee address; City; State; Zip Code 6888 GULF FREEWAY #330, HOUSTON, TX 77087			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) SOLICITATION/FUNDRAISING EXPENSE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 04/26/2017		Payee name NYCE GRAPHIX			
Amount (\$) \$ 182.94		Payee address; City; State; Zip Code 2616 SOUTH LOOP W, STE 215, HOUSTON, TX 77054			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) SOLICITATION/FUNDRAISING EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 05/01/2017		Payee name U.S. POSTMASTER			
Amount (\$) \$ 238.00		Payee address; City; State; Zip Code 1500 HADLEY ST, HOUSTON, TX 77002			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) SOLICITATION/FUNDRAISING EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling 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.

1 Total pages Schedule F1: 5 of 8	2 FILER NAME DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)
4 Date 05/02/2017	5 Payee name HARRIS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$ 120.00	7 Payee address; City; State; Zip Code 1445 N LOOP W #110, HOUSTON, TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEMBERSHIP FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 05/15/2017	Payee name TEXAS STATE UNIVERSITY SAN MARCUS	
Amount (\$) \$ 150.00	Payee address; City; State; Zip Code 1701 DIRECTORS BLVD, STE 530, AUSTIN, TX 78744	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) REGISTRATION FEE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 05/20/2017	Payee name OFFICE DEPOT	
Amount (\$) \$ 28.13	Payee address; City; State; Zip Code 3443 KIRBY DR, HOUSTON, TX 77098	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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.

1 Total pages Schedule F1: 6 of 8		2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 05/22/2017		5 Payee name JO-ANNS			
6 Amount (\$) \$ 21.17		7 Payee address; City; State; Zip Code 5520 WESLAYAN ST, HOUSTON, TX 77005			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) EVENT EXPENSE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/23/2017		Payee name ARNE'S			
Amount (\$) \$ 32.55		Payee address; City; State; Zip Code 2830 HICKS ST, HOUSTON, TX 77007			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) EVENT EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/20/2017		Payee name OFFICE DEPOT			
Amount (\$) \$ 31.00		Payee address; City; State; Zip Code 1576 W GRAY ST, HOUSTON, TX 77019			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) EVENT EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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.

1 Total pages Schedule F1: 7 of 8		2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 05/23/2017		5 Payee name THIA SPICE			
6 Amount (\$) \$ 140.15		7 Payee address; City; State; Zip Code 460 W 19th ST, HOUSTON, TX 77008			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/24/2017		Payee name CHINA GARDEN RESTAURANT			
Amount (\$) \$1,266.98		Payee address; City; State; Zip Code 1602 LEE LAND ST, HOUSTON, TX 77003			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) EVENT/FOOD EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/24/2017		Payee name EL BOLILLO BAKERY			
Amount (\$) \$ 90.00		Payee address; City; State; Zip Code 2421 S WAYSIDE, HOUSTON, TX 77023			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) EVENT/FOOD EXPENSE		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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
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.

1 Total pages Schedule F1: 8 of 8		2 FILER NAME DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 05/25/2017		5 Payee name TEXAS ASSOCIATION OF COUNTIES			
6 Amount (\$) \$ 200.00		7 Payee address; City; State; Zip Code PO BOX 2131, AUSTIN, TX 78768			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) REGISTRATION FEE		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

RECORDER'S MEMORANDUM:
At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.

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