

Official Public Records of Harris County
Stan Stanart
County Clerk

Campaign Finance Report



Stan Stanart

COUNTY CLERK HARRIS COUNTY, TEXAS

FileNo:

201780

Received By Clerk:

1/17/2017

File Date:

1/17/2017 3:55:47 PM

Office:

Justice Of The Peace Pct. 1, Place 2

Candidate:

Patronella, David

Treasurer:

Fritsche, T. M.

Category:

**Contributions And Expenditures** 

Delivered By:

Courier

Type:

COR

**Harris County No Fee** 

	CANDIDATE / OF N FINANCE REPO		DER	FOR COVER SHE	M JC/OH EET PG 1
The JC/OH Instruction G	uide explains how to complete thi	I '	D (Ethics Commission Filers)	2 Total pages filed	d: <b>47</b>
3 CANDIDATE/	MS / MRS / MR FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	MR DA\	/ID	M.	Date Received	
	NICKNAME LAST		SUFFIX	1	
	PA <sup>*</sup>	TRONELLA		_	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	P.O. BOX 10283, HOU		STATE: ZIP CODE		
5 CANDIDATE/	AREA CODE PHONE NUMB	ER	EXTENSION	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER PHONE	(713) 274-060	00			
6 CAMPAIGN	MS / MRS / MR FIRST		MI .	Receipt #	Amount \$
TREASURER NAME	T.		M	Date Processed	
IVAGE	NICKNAME LAST	ITSCHE	SUFFIX	Date Imaged	
		· · · · · · · · · · · · · · · · · · ·	CITY; STATE;	ZIP CODE	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	1001 FANNIN, HOL			211 0002	
8 CAMPAIGN TREASURER PHONE	( 713 ) 651-011		EXTENSION	31	
9 REPORT TYPE		n day before election	Runoff  Exceeded \$500 limit	treasurer ap (Officeholde	
10 050100					· · · · · · · · · · · · · · · · · · ·
10 PERIOD COVERED	07 / 01 / 2016	THROUGH	Month Day 12 / 31	<sup>Уевг</sup> / 2016	
11 ELECTION	ELECTION DATE Month Day Year [		ELECTION TYPI  Runoff Other Description  Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know	wn)	
	HARRIS COUNTY JUSTICE OF THE PI	EACE 1-2	SAME		
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 2

14 JC/OH NAME	AVID M. PATE		5 Filer ID (Ethics Commission Filers)		
6 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'S OR 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  INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE  COMMITTEE ADDRESS  900 SEVENTH ST, NW, WASHINGTON, DC 20001  COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages		SALVATORE J. CHILIA  COMMITTEE CAMPAIGN TREASURER ADDRESS  900 7TH ST, NW, WASHINGTON, DC 20001			
17 CONTRIBUTION TOTALS	PLEDGE 2. TOTAL	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THATS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ  POLITICAL CONTRIBUTIONS  THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS,	\$		
CONTRIBUTION BALANCE	5. TOTAL F	POLITICAL EXPENDITURES  POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	\$ 3, 574.38 DAY \$		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	THE \$		
STE NOTAR MY	EPHANIE COCHF 99217 1Y PUBLIC, STATE OF COMMISSION EXPIR OCT 11, 2020	true and correct and includes all info under Title 15, Election Code.  TEXAS  TEXAS	perjury, that the accompanying report is cormation required to be reported by me  Maturelle  Indidate or Officeholder		
Sworn to and subsc		by the said DAVID M. PATRONE. to certify which, witness my hand and seal of office.	(LA_, this the		
Signature of officer a	LOGUO 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 Com	nmission Filers)				
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT				
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 34,665.00				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 6,000.00				
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$				
4.	SCHEDULE E(J): LOANS (JUDICIAL)	\$				
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,574.38				
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/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$				

<b>NON-MONETARY</b>	(IN-KIND)	<b>POLITICAL</b>
CONTRIBUTIONS		

### SCHEDULE A2

TI	ne instruction Guide explains how to complete this form	1.	1 Total pages Schedule A2:
2 FILER NAM	E DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date 10/13/2016	6 Full name of contributor		8 Amount of Contribution \$ In-kind contribution description \$6,000.00 FOOD & DRINKS FOR FUNDRAISER
	2005 PERSA ST, HOUSTON, TX 77019		Check if travel outside of Texas. Complete Schedule T.
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	r (FOR NON-JUDICIAL) (See Instructions)
	s principal occupation (FOR JUDICIAL) RANTEUR	13 Contribut	tor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor	de	Amount of . In-kind contribution Contribution \$ . description
Principal oc	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICIAL)(See Instructions)
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm	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		

### SCHEDULE A(J)1

	The Instruction Guide explains how to complete this form.  1 Total pages Schedule A(J)1: 1 of 38					
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)		
4	Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)		
	09/02/2016	6 Contributor address; City; State; 1049 CHESHIRE LN, HOUSTON, TX 77	`	\$ 125.00		
8	-	principal occupation	9 Contributor's job title			
	RETIRED					
10	Contributor's	employer/law firm	11 Law firm of contributor	s spouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	DH:	Amount of contribution (\$)		
	09/07/2016	Contributor address; City; State;	Zip Code	\$ 200.00		
		1834 SOUTHMORE BLVD, HOUSTON,				
<del> </del>	Contributor's	principal occupation	Contributor's job title			
	ATTORNE					
-	Contributor's	employer/law firm	Law firm of contributor	's spouse (if any)		
L	KATINE &	NECHMAN L.L.P.				
	If contributor i	s a child, law firm of parent(s) (if any)	<i>.</i>			
	Date	Full name of contributor out-of-state PAC	D#:)	Amount of contribution (\$)		
		TOTZ, ELLISON & TOTZ, PC				
	09/07/2016	Contributor address; City; State:	Zip Code	\$ 1,000.00		
		2211 NORFOLD STREET, STE 510, HO	, , , , , , , , , , , , , , , , , , ,			
$\vdash$		principal occupation	Contributor's job title			
	LAW FIRM					
		employer/law firm	Law firm of contributor	's spouse (if any)		
		ISON & TOTZ, PC				
	If contributor i	is a child, law firm of parent(s) (if any)				

### SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: 2 of 38			
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)			
4 Date 09/07/2016	5 Full name of contributor		7 Amount of contribution (\$)			
09/01/2010	Contributor address; City; State; 530 S. 3RD ST, BELLAIRE, TX 77401	Zip Code	\$ 100.00			
8 Contributor's p ATTORNEY	principal occupation	9 Contributor's job title				
10 Contributor's e	employer/law firm	11 Law firm of contributor'	s spouse (if any)			
12 If contributor is	s a child, law firm of parent(s) (if any)		COL			
Date	Full name of contributor	D#:)	Amount of contribution (\$)			
09/13/2016	Contributor address; City; State; 714 SUGAR CREEK BLVD, SUGAR LAN	Zip Code ND, TX 77478	\$ 100.00			
Contributor's p	orincipal occupation  MAN	Contributor's job title				
	employer/law firm	Law firm of contributor	's spouse (If any)			
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC II	D#:)	Amount of contribution (\$)			
09/13/2016						
Contributor's   ATTORNEY	orincipal occupation	Contributor's job title				
Contributor's	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

### SCHEDULE A(J)1

TI	he Instruction Guide explains how to complete this fo	Total pages Schedule A(J)1: 3 of 38				
2 FILER NAME	DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)				
4 Date 09/13/2016	<ul> <li>Full name of contributor</li></ul>	Zip Code \$ 100.00				
8 Contributor's p ATTORNEY	principal occupation	9 Contributor's job title				
10 Contributor's e MORIARTY	LAW FIRM	11 Law firm of contributor's spouse (If any)				
12 if contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	Amount of contribution (\$)				
09/13/2016	Contributor address; City; State; HAMILTON ST, HOUSTON, TX 77004	Zip Code \$ 100.00				
Contributor's p	orincipal occupation	Contributor's job title				
DAVID CUI	employer/law firm NNINGHAM ATTORNEY AT LAW	Law firm of contributor's spouse (if any)				
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC ROBERT & JOHNITA LEBOW	D#:) Amount of contribution (\$)				
09/13/2016	Contributor address; City; State:					
Contributor's p	principal occupation	Contributor's job title				
Contributor's e	employer/law firm	Law firm of contributor's spouse (if any)				
If contributor i	If contributor is a child, law firm of parent(s) (if any)					

### SCHEDULE A(J)1

	The instruction Guide explai	1 Total pages Schedule A(J)1: 4 of 38				
2 FILER	DAVID M. PATRON	NELLA		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor RICHARD & LIND/	BISCHOFF	)	7 Amount of contribution (\$)		
09/1		City; State; /D, HOUSTON, TX 770	·	\$ 100.00		
8 Contr	butor's principal occupation	S	Contributor's job title			
10 Contr	butor's employer/law firm	1	1 Law firm of contributor	's spouse (if any)		
12 If can	tributor is a child, law firm of parent	s) (If any)				
Date	Full name of contribut DANIEL J SNOOK	_	:	Amount of contribution (\$)		
09/1		City; State: , STE 370, HOUSTON,		\$ 100.00		
	ibutor's principal occupation ORNEY		Contributor's job title			
	ibutor's employer/law firm NEL J SNOOKS ATTORNEY A	AT LAW	Law firm of contributor	r's spouse (if any)		
If cor	tributor is a child, law lirm of parent	(s) (if any)				
Date	Full name of contribut	<del></del>	:)	Amount of contribution (\$)		
09/1:	Contributor address; 4711 AFTONSHIF	City; State: RE DR, APT 2, HOUSTO		\$ 100.00		
Conti	ibutor's principal occupation		Contributor's job title	1		
Conti	ibutor's employer/law firm		Law firm of contributo	r's spouse (if any)		
If cor	If contributor is a child, law firm of parent(s) (if any)					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### SCHEDULE A(J)1

	Т	he Instruction Guide explains how to complete this form.	1 Total pages Schedule A(J)1: 5 of 38
2	FILER NAME	DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)
4	Date 09/13/2016	5 Full name of contributor	7 Amount of contribution (\$) \$ 250.00
8	Contributor's p	orincipal occupation  9 Contributor's job title	
	THE RAMO	employer/law firm  DS LAW MEDIATION FIRM	's spouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)	
	Date	Full name of contributor	Amount of contribution (\$)
	09/13/2016	Contributor address; City; State; Zip Code 1719 BLOUNT, HOUSTON, TX 77008	\$ 250.00
	Contributor's	orincipal occupation Contributor's job title	
	Contributor's e	employer/law firm Law firm of contributor	's spouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	
	Date	Full name of contributor	Amount of contribution (\$)
	09/13/2016	Contributor address; City; State: Zip Code 800 HEIGHTS BLVD, APT 42, HOUSTON, TX 77007	\$ 100.00
	Contributor's	orincipal occupation Contributor's job title	
		employer/law firm of contributo	r's spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

	Т	he Instruction Guide explains how to complete this fo	1 Total pages Schedule A(J)1: 6 of 38	
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4	Date	5 Full name of contributor		7 Amount of contribution (\$)
	09/13/2016	6 Contributor address; City; State; 13306 KIMBERLEY LN, HOUSTON, TX	i	\$ 100.00
8	Contributor's p	rincipal occupation	9 Contributor's job title	
10	Contributor's e	employer/law firm	11 Law firm of contributor	s spouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		COPY
	Date	Full name of contributor	1#:)	Amount of contribution (\$)
09/13/2016 Contributor address; City; State; Zip Code 2020 SW FREEWAY, STE 225, HOUSTON, TX 77098				\$ 500.00
	Contributor's ATTORNEY	orincipal occupation	Contributor's job title	
	HEBINCK & A		Law firm of contributor	's spouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	)#:) NI	Amount of contribution (\$)
	09/13/2016	Contributor address; City; State: 14146 BERTANIE LN, CYPRESS, TX 7	· ·	\$ 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 i	s a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### SCHEDULE A(J)1

т	he Instruction Guide explains how to complete this fo	1 Total pages Schedule A(J)1: 7 of 38			
2 FILER NAME	DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)			
4 Date	MARGARET POISSANT	)	7 Amount of contribution (\$)		
09/13/2016	6 Contributor address; City; State; 800 SAWYER ST, HOUSTON, TX 7700		\$ 300.00		
8 Contributor's p	orincipal occupation	9 Contributor's job title			
10 Contributor's e		11 Law firm of contributor	s spouse (if any)		
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	D#:)	Amount of contribution (\$)		
09/13/2016	Contributor address; City; State; 3730 BELLEFONTAINE, HOUSTON, TX		\$ 500.00		
Contributor's p	principal occupation	Contributor's job title			
Contributor's employer/law firm  Law firm of contributor's spouse (if any)					
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	D#:)	Amount of contribution (\$)		
09/13/2016	Contributor address; City; State: 5300 MEMORIAL DR, STE 725, HOUST	,	\$ 500.00		
Contributor's principal occupation  ATTORNEY  Contributor's job title			-		
	employer/law firm ITEHEAD & ASSOCIATES	Law firm of contributor	's spouse (if any)		
If contributor i	If contributor is a child, law firm of parent(s) (if any)				

### SCHEDULE A(J)1

т	he instruction Guide explains how to complete this fo	rm. 1 Total pages Schedule A(J)1: 8 of 38
2 FILER NAME	DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor  out-of-state PAC ID BRIAN CWEREN	7 Amount of contribution (\$)
09/13/2016	6 Contributor address; City; State; 3311 RICHMOND AVE, STE 305, HOUS	
8 Contributor's ATTORNEY	principal occupation	9 Contributor's job title
10 Contributor's	employer/law firm	11 Law firm of contributor's spouse (if any)
I AW OFFIC	E OF BRIAN CWEREN	
	s a child, law firm of parent(s) (if any)	
Date	Full name of contributor	#:
09/13/2016	Contributor address; City; State; 1130 RICHARDS DR, FRIENDSWOOD,	
Contributor's ATTORNEY	principal occupation	Contributor's job title
ß	employer/law firm	Law firm of contributor's spouse (If any)
If contributor	s a child, law firm of parent(s) (if any)	
Date	Full name of contributor	D#:) Amount of contribution (\$)
09/13/2016	Contributor address; City; State: P.O. BOX 4547, HOUSTON, TX 77210	Zip Code \$ 500.00
Contributor's ATTORNE	principal occupation Y	Contributor's job title
	employer/law firm SLOVACEK LLP, ATTORNEYS AT LAW	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

MONET (JUDIC	TARY POLITICAL CONTRII	BUTIONS	SCHEDULE A(J)1
т	he Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A(J)1: 9 of 38
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor Out-of-state PAC ID ANDREW P. McCORMICK	#:)	7 Amount of contribution (\$)
09/13/2016	6 Contributor address; City; State; 4950 BISSONNET ST, BELLAIRE, TX 77	·	\$ 500.00
3 Contributor's p	principal occupation	9 Contributor's job title	
O Contributor's e	employer/law firm E OF ANDREW P. McCORMICK	11 Law firm of contributor's	s spouse (if any)
2 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor		Amount of contribution (\$)
09/14/2016	Contributor address; City; State; 2901 BAMMEL LN #9, HOUSTON, TX 7	Zip Code	\$ 100.00
Contributor's p	principal occupation	Contributor's job title	
RETIRED			
Contributor's e	employer/law firm	Law firm of contributor	s spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	)#:)	Amount of contribution (\$)
09/16/2016	Contributor address; City; State: 4910 GOLF DR, HOUSTON, TX 77018	Zip Code	\$ 50.00
Contributor's	orincipal occupation	Contributor's job title	
Contributor's e	employer/law firm	Law firm of contributor	s spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
	ATTAONABBITIONAL COSTO	E TUIO COLUEDUU E ACA	TEEDED.
1	ATTACH ADDITIONAL COPIES Of contributor is out-of-state PAC, please see instru		

<b>MONETARY</b>	<b>POLITICAL</b>	<b>CONTRIBUTIONS</b>
(JUDICIAL)		

### SCHEDULE A(J)1

T	ne Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A(J)1: 10 of 38
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date	JOE F WHEAT	)#:)	7 Amount of contribution (\$)
09/16/2016	6 Contributor address; City; State; 4544 POST OAK PLACE DR, STE 350, H	-	\$ 100.00
8 Contributor's p	rincipal occupation	9 Contributor's Job title	
10 Contributor's 6		11 Law firm of contributor	's spouse (If any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)
09/16/2016	Contributor address; City; State; 3982 RUPE HUFFMAN RD, LONGVIEW	Zip Code	\$ 100.00
Contributor's r	principal occupation	Contributor's job title	
Outributor's p	milicipal occupation	CONTIDUOTS JOB title	
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	D#:	Amount of contribution (\$)
09/16/2016	Contributor address; City; State: 7 LITTLE RISE DR, MISSOURI CITY, TX	·	\$ 100.00
Contributor's	orincipal occupation	Contributor's job title	
Contributor's e	employer/law firm	Law firm of contributor	r's spouse (if any)
lf contributor i	s a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### SCHEDULE A(J)1

The Instruction Guide explain	ns how to complete this form.	1 Total pages Schedule A(J)1: 11 of 38
2 FILER NAME DAVID M. PATRON	IELLA	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributo KEVIN HALL	r	7 Amount of contribution (\$)
09/16/2016 6 Contributor address; 3201 HILCROFT S	City; State; Zip Code T #2B, HOUSTON, TX 77057	\$ 100.00
8 Contributor's principal occupation	9 Contributor's jo	b title
10 Contributor's employer/law firm	11 Law firm of con	tributor's spouse (if any)
12 If contributor is a child, law firm of parent(	s) (if any)	
Pull name of contribute WILLIAM CLEVEN	_	Amount of contribution (\$)
09/16/2016 Contributor address; 4438 HOLLOW HO	City; State; Zip Code OOK, HOUSTON, TX 77041	\$ 250.00
Contributor's principal occupation	Contributor's jo	b title
Contributor's employer/law firm		tributor's spouse (if any)
If contributor is a child, law firm of parent(	s) (if ahy)	
Date Full name of contribute MICHAEL & ALLY	Or out-of-state PAC ID#:SON PATRONELLA	) Amount of contribution (\$)
09/16/2016 Contributor address; 7 WOODSBOROU	City; State: Zip Code IGH CIR, HOUSTON, TX 77055	\$ 250.00
Contributor's principal occupation	Contributor's jo	b title
Contributor's employer/law firm	Law firm of cor	ntributor's spouse (if any)
If contributor is a child, law firm of parent(	s) (if any)	

### SCHEDULE A(J)1

	Th	ne instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A(J)1: 12 of 38
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4	Date	5 Full name of contributor	#:C00027342)	7 Amount of contribution (\$)
,	09/16/2016	6 Contributor address; City; State; 900 SEVENTH ST, NW, WASHINGTON,	·	\$ 1,000.00
8	Contributor's p	rincipal occupation	9 Contributor's job title	
10	Contributor's e	mployer/law firm	11 Law firm of contributor's	s spouse (if any)
12	If contributor is	a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	ERT CONTI	Amount of contribution (\$)
	09/16/2016	Contributor address; City; State; 918 HEIGHTS BLVD, STE 1, HOUSTON		\$ 1,000.00
	Contributor's p	rincipal occupation	Contributor's job title	
	Contributor's e	mployer/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	)#:)	Amount of contribution (\$)
	09/20/2016	Contributor address; City; State: 2101 LOUISIANA ST, HOUSTON, TX 77	·	\$ 100.00
	Contributor's p	rincipal occupation	Contributor's job title	
	ATTORNEY			
		mployer/law firm	Law firm of contributor	's spouse (if any)
	<del> </del>	BOYD & LOWERY, PC		
	If contributor is	a child, law firm of parent(s) (if any)		
l				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	S SCHEDULE A(J)1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A(J)1: 13 of 38
2 FILER NAME DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full-name of contributor Out-of-state PAC ID#:	7 Amount of contribution (\$)
09/20/2016 6 Contributor address; City; State; Zip Code 2432 NOTTINGHAM, HOUSTON, TX 77005	\$ 100.00

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

Full name of contributor

Full name of contributor

Contributor address;

KLOSOWSKY LAW OFFICES

ROSS, BANKS, MAY, CRON & CAVIN, PC

8 Contributor's principal occupation

10 Contributor's employer/law firm

Date

09/22/2016

**ATTORNEY** 

09/20/2016	Contributor address;	City; State;	Zip Code	\$	250.00	
	7700 SAN FELIPE, ST	E 550, HOUSTON	I, TX 77063			
Contributor's p	principal occupation		Contributor's jo	b title		
Contributor's e	mployer/law firm		Law firm of con	tributor's spouse	e (if any)	
ROSS, BANKS	S, MAY, CRON & CAVIN, PC					
If contributor is	a child, law firm of parent(s) (if	any)				
						_
Date	Full name of contributor	Out-of-state PAC II	)#·	) Ami	ount of contribution (\$)	

City; State: Zip Code

Contributor's job title

Law firm of contributor's spouse (if any)

ut-of-state PAC ID#:

ut-of-state PAC ID#:

14015 SW FRWY, STE 14, SUGAR LAND, TX 77478

9 Contributor's job title

11 Law firm of contributor's spouse (if any)

Amount of contribution (\$)

Amount of contribution (\$)

100.00

**KLOSOWSKY LAW OFFICES** If contributor is a child, law firm of parent(s) (if any)

Contributor's principal occupation

Contributor's employer/law firm

### SCHEDULE A(J)1

T:	he instruction Guide explains how to complete this form.	1 Total pages Schedule A(J)1: 14 of 38
2 FILER NAME	DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2016	5 Full name of contributor OUT-01-State PAC ID#:  RODERICK O. GIBSON  6 Contributor address; City; State; Zip Code 416 WESTHEIMER RD, HOUSTON, TX 77006	7 Amount of contribution (\$) \$ 100.00
8 Contributor's p	principal occupation 9 Contril	butor's job title
	omployer/law firm  D. GIBSON, ATTORNEY AT LAW  s a child, law firm of parent(s) (If any)	rm of contributor's spouse (if any)
Date	Full name of contributor	Amount of contribution (\$)
09/22/2016	Contributor address; City; State; Zip Code 4305 RICHMOND AVE, HOUSTON, TX 77027	\$ 200.00
Contributor's	principal occupation Contri	butor's job title
BUSINESS O	WNER III	
SOUTH TEXA	AS CARPETS & FINE FLOORS s a child, law firm of parent(s) (if any)	rm of contributor's spouse (if any)
Date	Full name of contributor	Amount of contribution (\$)
09/22/2016	Contributor address; City; State: Zip Code 2158 BRIARGLEN DR, HOUSTON, TX 77027	\$ 250.00
	principal occupation Contri	ibutor's job title
		irm of contributor's spouse (if any)
If contributor i	s a child, law firm of parent(s) (if any)	
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MONETARY (JUDICIAL)	CONTRIBUTIONS

### SCHEDULE A(J)1

T)	ne Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A(J)1: 15 of 38
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	#:)	7 Amount of contribution (\$)
09/22/2016	6 Contributor address; City, State; 2204 LOUISIANA, STE 233, HOUSTON,	Zip Code TX 77002	\$ 250.00
8 Contributor's p	rincipal occupation	9 Contributor's job title	
BUSINESSM	AN		
10 Contributor's e	mployer/law firm	11 Law firm of contributor's	s spouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC IE CHRISTOPHER K. PATRONELLA, MD	#:)	Amount of contribution (\$)
09/22/2016	Contributor address; City; State; 12601 MOSSYCUP DR, HOUSTON, TX	Zip Code 77024	\$ 250.00
Contributor's p	principal occupation	Contributor's job title	
PHYSICIAN			
	imployer/law firm	Law firm of contributor's	s spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor		Amount of contribution (\$)
09/22/2016	Contributor address; City; State: 1509 ARLINGTON, HOUSTON, TX 770		\$ 500.00
Contributor's	orincipal occupation	Contributor's job title	
ATTORNEY			
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	rm.	Total pages Schedule A(J)1: 16 of 38
2 FILER NAME	DAVID M. PATRONELLA	3	Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	#:	Amount of contribution (\$)
09/22/2016	Gontributor address; City; State; PO BOX 741109, HOUSTON, TX 77274	Zip Code -1109	\$ 1,000.00
	orincipal occupation MANAGEMENT	9 Contributor's job title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	·	
Date	Full name of contributor	) A:)	Amount of contribution (\$)
09/26/2016	Contributor address; City; State; 9826 MAREK RD, HOUSTON, TX 77036	Zíp Code	\$ 100.00
Contributor's p	principal occupation	Contributor's job title	
Contributor's e	employer/law firm	Law firm of contributor's s	spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	74:	Amount of contribution (\$)
09/26/2016	Contributor address; City; State: 2403 WEBSTER RANCH RD, FRIENDS	Zip Code WOOD, TX 77546	\$ 100.00
Contributor's	orincipal occupation	Contributor's job title	
RETIRED			
Contributor's e	employer/law firm	Law firm of contributor's	spouse (if any)
If contributor i	s a child, law firm of parent(s) (if any)		

### SCHEDULE A(J)1

	Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1: 17 of 38	
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4	Date	5 Full name of contributor out-of-state PAC ID#:) DOMINIQUE & ROY VARNER		7 Amount of contribution (\$)	
	09/26/2016	6 Contributor address; City; State; 8007 EDGMOOR DR, HOUSTON, TX 7		\$ 250.00	
8	Contributor's	principal occupation	9 Contributor's job title		
	ATTORNEYS	5			
10	Contributor's	employer/law firm	11 Law firm of contributor	s spouse (if any)	
12	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor		Amount of contribution (\$)	
09/26/2016 Contributor address; City; State; Zip Code \$ 5 4810 WESTWAY PARK BLVD, HOUSTON, TX 77041				\$ 500.00	
	Contributor's principal occupation  PAC  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	D#:)	Amount of contribution (\$)	
	09/26/2016	Contributor address; City; State: 2318 WILLOWBY DR, HOUSTON, TX	-	\$ 1,500.00	
	Contributor's	principal occupation	Contributor's job title		
TAX CONSULTANTS					
Contributor's employer/law firm Law firm of contr			Law firm of contributor	's spouse (if any)	
	If contributor is a child, law firm of parent(s) (if any)				

2 FILER NAME  4 Date  09/28/2016  8 Contributor's pr ATTORNEY  10 Contributor's en ESSMYER & E	MICHAEL M. ESSMYER, SR  6 Contributor address; City; State; 5111 CENTER ST, HOUSTON, TX 7700 incipal occupation  nployer/law firm	Zip Code  77  9 Contributor's job title  11 Law firm of contributor	1 Total pages Schedule A(J)1: 18 of 38  3 Filer ID (Ethics Commission Filers)  7 Amount of contribution (\$)  \$ 100.00
4 Date 09/28/2016  8 Contributor's pr ATTORNEY  10 Contributor's en ESSMYER & E	5 Full name of contributor	Zip Code  07  9 Contributor's job title  11 Law firm of contributor	7 Amount of contribution (\$) \$ 100.00
09/28/2016  8 Contributor's pr ATTORNEY  10 Contributor's en ESSMYER & E	MICHAEL M. ESSMYER, SR  6 Contributor address; City; State; 5111 CENTER ST, HOUSTON, TX 7700 incipal occupation inployer/law firm DANIEL, PC a child, law firm of parent(s) (if any)	Zip Code  07  9 Contributor's job title  11 Law firm of contributor	\$ 100.00
8 Contributor's pr ATTORNEY 10 Contributor's en ESSMYER & D	Contributor address; City; State;  5111 CENTER ST, HOUSTON, TX 7700  incipal occupation  inployer/law firm  DANIEL, PC  a child, law firm of parent(s) (if any)  Full name of contributor	Zip Code  77  9 Contributor's job title  11 Law firm of contributor	's spouse (if any)
ATTORNEY  10 Contributor's en  ESSMYER & E	nployer/law firm  DANIEL, PC  a child, law firm of parent(s) (if any)  Full name of contributor	11 Law firm of contributor	
ESSMYER & D	DANIEL, PC a child, law firm of parent(s) (if any)  Full name of contributor		
	a child, law firm of parent(s) (if any)  Full name of contributor		
	a child, law firm of parent(s) (if any)  Full name of contributor	ID#:)	
12 If contributor is	<del>-</del>	ID#:)	A (A - A A (C)
Date			Amount of contribution (5)
10/03/2016	Contributor address; City; State; 3334 RICHMOND AVE, STE 218, HOUS	\$ 25.00	
Contributor's principal occupation  ATTORNEY  Contributor's employer/law firm  Law firm of contributor's spouse (If any)			
			r's spouse (If any)
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
10/03/2016	Contributor address; City; State: 1516 MICHIGAN, HOUSTON, TX 77006	,	\$ 100.00
Contributor's pr	incipal occupation	Contributor's job title	
ATTORNEY			
Contributor's er	nployer/law firm	Law firm of contributo	r's spouse (if any)
THOMAS M WHITWORTH, ATTORNEY AT LAW			
If contributor is a child, law firm of parent(s) (if any)			
	ATTACH ADDITIONAL COPIES Contributor is out-of-state PAC, please see instru		

#### SCHEDULE A(J)1

	Т	he Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A(J)1: 19 of 38		
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)		
4	Date	5 Full name of contributor Out-of-state PAC ID#:	)	7 Amount of contribution (\$)		
	10/03/2016	6 Contributor address; City; State; 4922 VALKEITH DR, HOUSTON, TX 7709	Zip Code	\$ 100.00		
8	Contributor's p	rincipal occupation 9	Contributor's job title			
10	Contributor's e	employer/law firm . 1	1 Law firm of contributor's	s spouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor		Amount of contribution (\$)		
	10/03/2016	Contributor address; City; State; 1800 SAINT JAMES PL, STE 200, HOUST	Zip Code FON, TX 77056	\$ 100.00		
	Contributor's r	principal occupation	Contributor's job title			
	ATTORNEY					
		employer/law firm	Law firm of contributor's	s spouse (if any)		
	CIANO PASTA, ATTORNEY AT LAW  If contributor is a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	:)	Amount of contribution (\$)		
	10/03/2016		Zip Code 77002	\$ 100.00		
	Contributor's	principal occupation	Contributor's job title			
	ATTORNEY					
		employer/law firm AFFER, LAWYER	Law firm of contributor	s spouse (if any)		
		s a child, law firm of parent(s) (if any)				
		e, an initial parametry (ii unjy)				

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	MONET JUDIC	ARY POLITICAL CONTRI	BUTIONS	SCHEDULE A(J)1
				<del>/</del> 3
	TI	he instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1: 20 of 38
2 F	ILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
<b>4</b> D	ate	5 Full name of contributor	D#:1	7 Amount of contribution (\$)
1	0/03/2016	6 Contributor address; City; State; 2000 BERING DR, STE 909, HOUSTON		\$ 200.00
_	ontributor's p	rincipal occupation	9 Contributor's job title	
10 C	ontributor's e	mployer/law firm	11 Law firm of contributor	's spouse (if any)
	WILLIAMS, E	BIRNBERG & ANDERSEN, LLP		
12 If	contributor is	s a child, law firm of parent(s) (if any)		
D	ate	Full name of contributor	D#:)	Amount of contribution (\$)
1	0/03/2016	Contributor address; City; State; 2715 SUNSET BLVD, HOUSTON, TX 7		\$ 1,000.00
С	Contributor's principal occupation Contributor's job		Contributor's job title	
(	CP <b>A</b>			
		employer/law firm FRACY, CPA	Law firm of contributor	r's spouse (if any)
If	contributor is	s a child, law firm of parent(s) (if any)		
D	ate	Full name of contributor Out-of-state PAC LAWRENCE KAGAN	D#:)	Amount of contribution (\$)
10	0/03/2016	Contributor address; City; State: 8801 KNIGHT RD, HOUSTON, TX 770		\$ 250.00
C	Contributor's p	principal occupation	Contributor's job title	<del></del>
F	REAL ESTAT	E		
C	Contributor's e	employer/law firm	Law firm of contributo	r's spouse (if any)
lf	contributor is	s a child, law firm of parent(s) (if any)		

### SCHEDULE A(J)1

	V		
TI	ne Instruction Guide explains how to complete this form	1.	1 Total pages Schedule A(J)1: 21 of 38
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC ID#:_ DAN HINES	)	7 Amount of contribution (\$)
10/03/2016	6 Contributor address; City; State; 27 DARTMOOR DT, SUGAR LAND, TX 77	· ·	\$ 250.00
8 Contributor's p	wner 9	Contributor's job title	
10 Contributor's e	mployer/law firm	1 Law firm of contributor's	spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	)	Amount of contribution (\$)
10/04/2016	Contributor address; City; State; 3401 HOUSTON AVE, HOUSTON, TX. 770	Zip Code 009	\$ 25.00
Contributor's p	orincipal occupation	Contributor's job title	
ATTORNEY			
Contributor's e	employer/law firm	Law firm of contributor's	spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	:)	Amount of contribution (\$)
10/05/2016	Contributor address; City; State: 9531 WILLOWLAKE PARK DR, HOUSTON	Zip Code N, TX 77064	\$ 100.00
Contributor's p	principal occupation	Contributor's job title	
<u>MAINTE</u> NAN	CE ELECTRICIAN		
Contributor's e	employer/law firm	Law firm of contributor's	s spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

#### SCHEDULE A(J)1

	Т	he Instruction Guide explains how to complete this form.	1 Total pages Schedule A(J)1: 22 of 38			
2	FILER NAME	DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)			
4	Date 10/07/2016	5 Full name of contributor  JOHN R BARTOS  City; State; Zip Code	7 Amount of contribution (\$) \$ 100.00			
		1235 N LOOP WEST, STE 208, HOUSTON, TX 77008	5 100.00			
8	Contributor's p	principal occupation  9 Contributor's job title				
10	Contributor's	employer/law firm of contributor	's spouse (if any)			
L	JOHN R. BA	RTOS, ATTORNEY AT LAW				
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	Amount of contribution (\$)			
	10/07/2016	Contributor address; City; State; Zip Code 2311 CANAL ST, STE 304, HOUSTON, TX 77003	\$ 250.00			
	Contributor's p	orincipal occupation Contributor's job title				
	ATTORNEY					
	Contributor's	employer/law firm Law firm of contributor	's spouse (If any)			
		R, ATTORNEY AT LAW				
	If contributor is a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	Amount of contribution (\$)			
	10/07/2016	Contributor address; City; State: Zip Code 448 W 19TH ST, STE 171, HOUSTON, TX 77008	\$ 1,000.00			
	Contributor's	orincipal occupation Contributor's job title				
	ATTORNEY					
	Contributor's	employer/law firm Law firm of contributo	r's spouse (if any)			
	FULKERSON	& WING, PC				
	If contributor i	s a child, law firm of parent(s) (if any)				
1						

### SCHEDULE A(J)1

T	he instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1: 23 of 38	
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date	DR JAN PER BERGMANSON	D#:)	7 Amount of contribution (\$)	
10/07/2016	6 Contributor address; City; State; 2046 McCLENDON ST, HOUSTON, TX		\$ 150.00	
8 Contributor's p	orincipal occupation	9 Contributor's job title		
10 Contributor's e		11 Law firm of contributor's	spouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	SAMUEL COLLINS	D#:)	Amount of contribution (\$)	
10/10/2016	Contributor address; City; State; 2514A SOUTH BLVD, HOUSTON, TX 7	Zip Code 7098	\$ 250.00	
Contributor's principal occupation  ATTORNEY  Contributor's job title				
Contributor's e	employer/law firm	Law firm of contributor's	s spouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)		CODI	
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
10/11/2016			\$ 100.00	
Contributor's	principal occupation	Contributor's Job title		
ATTORNEY				
	employer/law firm	Law firm of contributor	s spouse (if any)	
PHILOAN M.	TRAN, PC			
If contributor i	s a child, law firm of parent(s) (if any)			
~				

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A(J)1: 24 of 38	
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date	ERIC SAMET	)#:)	7 Amount of contribution (\$)	
10/11/2016	6 Contributor address; City; State; 4987 VALKEITH, HOUSTON, TX 77096		\$ 500.00	
8 Contributor's p	principal occupation	9 Contributor's job title		
REAL ESTAT	E			
10 Contributor's e	employer/law firm	11 Law firm of contributor's	s spouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)		001	
Date	Full name of contributor	O#:)	Amount of contribution (\$)	
10/11/2016	Contributor address; City; State; 5571 CANDLEWOOD, HOUSTON, TX 7		\$ 250.00	
Contributor's p	orincipal occupation	Contributor's job title		
RETIRED				
Contributor's employer/law firm  Law firm of contributor's spouse (if any)				
If contributor is	s a child, law firm of parent(s) (if any)			
Date	JAMES F KOVACH	D#:	Amount of contribution (\$)	
10/12/2016	Contributor address; City; State: 170 WESTCOTT ST, HOUSTON, TX 77	· · · · · · · · · · · · · · · · · · ·	\$ 500.00	
Contributor's	principal occupation	Contributor's job title		
ATTORNEY				
	employer/law firm	Law firm of contributor	's spouse (if any)	
	W FIRM, PLLC			
If contributor i	s a child, law firm of parent(s) (if any)			

### SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A(J)1: 25 of 38				
DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)				
5 Full name of contributorout-of-state PAC ID#: LESLIE BRINKOETER & ALLYSON DAVIS	7 Amount of contribution (\$)				
10/12/2016 6 Contributor address; City; State; Zip Code 398 VALLEY VIEW DR, LAGRANGE, TX 778945	\$ 250.00				
8 Contributor's principal occupation 9 Contribu	tor's job title				
PROPERTY MANAGEMENT					
	of contributor's spouse (if any)				
12 If contributor is a child, law firm of parent(s) (if any)					
Full name of contributor out-of-state PAC ID#:CHARLES & PAULINE PATRONELLA  10/12/2016 Contributor address; City; State; Zip Code 10501 E. WILDWIND CIR, THE WOODLANDS, TX	Amount of contribution (\$)  \$ 100.00				
Contributor's principal occupation	itor's job title				
RETIRED	·				
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 out-of-state PAC ID#:	Amount of contribution (\$)				
10/12/2016 Contributor address; City; State: Zip Code \$ 2,500.00 \$ 5959 RICHMOND AVE, STE 440, HOUSTON, TX					
Contributor's principal occupation Contribu	utor's job title				
Contributor's employer/law firm Law firm	n of contributor's spouse (if any)				
RICHMOND / WESLAYAN LTD					
If contributor is a child, law firm of parent(s) (if any)					

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<b>MONETARY</b>	POLITICAL	CONTRIBUTIONS
(JUDICIAL)		

### SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A(J)1: 26 of 38
DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)
5 Full name of contributor out-of-state PAC ID#:  KATHERINE A CALDWELL  10/12/2016 6 Contributor address: Clause States 7 in Code	7 Amount of contribution (\$)
Contributor address; City, State; Zip Code 1218 STANFORD ST, HOUSTON, TX 77019	\$ 100.00
8 Contributor's principal occupation 9 Contrib	outor's job title
10 Contributor's employer/law firm 11 Law fir	m of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor ☐ out-of-state PAG ID#:  JERRY L. SCHUTZA	Amount of contribution (\$)
10/12/2016 Contributor address; City; State; Zip Code 11 GREENWAY PLAZA, STE 2820, HOUSTON, T.	\$ 250.00 X 77046
Contributor's principal occupation Contrib	outor's job title
Contributor's employer/law firm  JERRY L. SCHUTZA, ATTORNEY AT LAW	m of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-of-state PAC  D#:  JOHN HAVINS	Amount of contribution (\$)
10/13/2016 Contributor address; City; State: Zip Code 2211 NORFOLK ST, STE 525, HOUSTON, TX 776	\$ 500.00
Contributor's principal occupation Contrib	outor's job title
ATTORNEY	
Contributor's employer/law firm	rm of contributor's spouse (if any)
HAVINS & ASSOCIATES, PC	
If contributor is a child, law firm of parent(s) (if any)	

#### SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.				1	Total pages Schedule A(J)1: 27 of 38
2	FILER NAME	DAVID M. PATRONELLA		3	Filer ID (Ethics Commission Filers)
4	Date 10/13/2016	5 Full name of contributor   out-of-state PAC ID HELENA MARIE DOBAY  6 Contributor address; City; State; 1240 CURTIN ST, HOUSTON, TX 77018	Zip Code	7	Amount of contribution (\$) \$ 50.00
8	•	principal occupation	9 Contributor's job title		
10	EDUCATOR  Contributor's 6	imployer/law firm	11 Law firm of contributor	s sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)			
	Date 10/14/2016	Full name of contributor	Zip Code		Amount of contribution (\$) \$ 1,000.00
	Contributor's	orincipal occupation	Contributor's job title		
	PAC		7		
	Contributor's	employer/law firm	Law firm of contributor	's sp	oouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor			Amount of contribution (\$)
	10/14/2016	Contributor address; City; State: 2200 N LOOP W, STE 200, HOUSTON,	·		\$ 1,000.00
	Contributor's	principal occupation	Contributor's job title		
L	LAW FIRM				
		employer/law firm	Law firm of contributor	'S 5	pouse (if any)
		ONNOR & ASSOCIATES LP			
	If contributor i	s a child, law firm of parent(s) (if any)			
_					

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### SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: 28 of 38	
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date 10/14/2016	5 Full name of contributor CLAUDIO R ROMAN 7 Amount of contribution (\$)			
	6 Contributor address; City; State; 19607 PINEY PLACE CT, HOUSTON, TX	.	\$ 500.00	
8 Contributor's p	orincipal occupation	9 Contributor's job title		
ATTORNEY				
10 Contributor's e	' '	11 Law firm of contributor	's spouse (if any)	
	ROMAN, ATTORNEY AT LAW			
12 If contributor is a child, law firm of parent(s) (if any)				
Date 10/14/2016	Full name of contributor	Zip Code	Amount of contribution (\$) \$ 500.00	
1714 MERCOAL DR, SPRING, TX 77386				
Contributor's principal occupation  Contributor's job title				
ATTORNEY  Contributor's employer/law firm				
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	Date Full name of contributor out-of-state PAC ID#:) Amount of contribution (\$)  DONALD DEGRASSE			
10/14/2016 Contributor address; City; State: Zip Code \$ 250.00 1800 BERING DR, STE 1000, HOUSTON, TX 77057				
Contributor's principal occupation  ATTORNEY  Contributor's job title				
Contributor's employer/law firm		Law firm of contributor	r's spouse (if any)	
DEGRASSE LAW FIRM, PC				
If contributor is a child, law firm of parent(s) (if any)				

### SCHEDULE A(J)1

The instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: 29 of 38	
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributorout-of-state PAC_ID#:) MICHAEL D. & DARLENE PAYNE SMITH			
10/14/2016	6 Contributor address; City; State; 1401 McKINNEY, 17TH FL, HOUSTON,	·	\$ 250.00	
8 Contributor's p	rincipal occupation	9 Contributor's job title		
ATTORNEY		PARTNER		
10 Contributor's e	mployer/law firm	11 Law firm of contributor	's spouse (if any)	
CRAIN & CA	TON			
12 If contributor is a child, law firm of parent(s) (if any)				
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
10/14/2016	Contributor address; City; State; P.O. BOX BOX 55753, HOUSTON, TX	77255	\$ 200.00	
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	ID#:)	Amount of contribution (\$)	
10/14/2016	Contributor address; City; State: 700 LOUISIANA ST, 48TH FL, HOUSTO	•	\$ 200.00	
Contributor's p	orincipal occupation	Contributor's job title		
LAW FIRM				
Contributor's employer/law firm  Law firm of contributor's spouse (if any)  GREALISH & McZEAL, PC				
If contributor is a child, law firm of parent(s) (if any)				

#### SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.  1 Total pages Schedule A(J)1: 30 of 38					
2	FILER NAME	DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)		
4	Date	5 Full name of contributor	7 Amount of contribution (\$)		
	10/14/2016	6 Contributor address; City; State; Zip Code 1800 SAINT JAMES PL, STE 200, HOUSTON, TX 77056	\$ 100.00		
8	Contributor's p	principal occupation 9 Contributor's job title			
•	ATTORNEY				
10		employer/law firm 11 Law firm of contributor	la annua (if anu)		
10			s spouse (ii any)		
		TA, ATTORNEY AT LAW			
12	If contributor is	s a child, law firm of parent(s) (if any)			
_	Data				
	Date	Full name of contributor	Amount of contribution (\$)		
		GORDON LAW FIRM			
	10/14/2016	Contributor address; City; State; Zip Code	\$ 100.00		
		1800 SAINT JAMES PLACE, STE 200, HOUSTON, TX 77056			
	Contributor's p	principal occupation Contributor's job title			
LAW FIRM					
Contributor's employer/law firm Law firm of contributor's spouse (if any)					
	GORDON LAW FIRM				
If contributor is a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	Amount of contribution (\$)		
		ROBERT B. HINSLEY			
	10/11/0010		\$ 100.00		
	10/14/2016	Contributor address; City; State: Zip Code	Ψ 100.00		
		6250 WSTPARK DR, STE 134, HOUSTON, TX 77057			
Contributor's principal occupation Contributor's job title					
ATTORNEY					
Contributor's employer/law firm Law firm of contributor's spouse (if any)					
ROBERT B. HINSLEY, ATTORNEY AT LAW					
If contributor is a child, law firm of parent(s) (if any)					

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

The instruction Guide explains how to complete this	s form.  1 Total pages Schedule A(J)1: 31 of 38		
2 FILER NAME DAVID M. PATRONELLA	DAVID M. PATRONELLA		
BOB ROSENBERG	BOB ROSENBERG		
10/14/2016 6 Contributor address; City; State 6250 WESTPARK DR, STE 134, HOUS	te; Zip Code \$ 100.00		
8 Contributor's principal occupation	9 Contributor's job title		
ATTORNEY			
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)		
BOB ROSENBERG, ATTORNEY AT LAW			
12 If contributor is a child, law firm of parent(s) (if any)			
	`		
Date	Amount of contribution (\$)		
Full name of contributor  out-of-state PAC  GREGORY & WENONA LINDLEY	C ID#:)		
40/44/2046			
	te; Zip Gode		
9811 KINDLETREE, HOUSTON, TX 77040			
Contributor's principal occupation ATTORNEY	Contributor's job title		
Contributor's employer/law firm  Law firm of contributor's spouse (if any)			
GREG LINDLEY, ATTORNEY			
If contributor is a child, law firm of parent(s) (if any)			
Date Full name of contributor □ out-of-state PAC BETSY GRUBBS	C ID#:) Amount of contribution (\$)		
10/14/2016 Contributor address; City; State 14015 SW FWY, STE 4, SUGAR LANK	ate: Zip Code \$ 50.00		
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)			

#### SCHEDULE A(J)1

	1	The Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A(J)1: 32 of 38			
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)			
4	Date	5 Full name of contributor	#:)	7 Amount of contribution (\$)			
	10/14/2016	6 Contributor address; City: State; 12811 GREENWOOD FRST DR #2405, H	•	\$ 40.00			
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	2 If contributor is a child, law firm of parent(s) (if any)						
	Date	Full name of contributor Out-of-state PAC ID	)#:)	Amount of contribution (\$)			
	10/14/2016	Contributor address; City; State; 2106 THREE WOOD DR, HOUSTON, TX	Zip Code < 77089	\$ 100.00			
	Contributor's JUDGE	principal occupation	Contributor's job title				
	Contributor's	employer/law firm	Law firm of contributor's	s spouse (if any)			
	HARRIS CO						
	II contributor	is a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	)#:)	Amount of contribution (\$)			
	10/25/2016	Contributor address; City; State: 2829 SHOAL CREST AVE, AUSTIN, TX	Zip Code 78705	\$ 100.00			
	Contributor's	principal occupation	Contributor's job title				
	ATTORNEY		<b>N</b>				
_	Contributor's	employer/law firm	Law firm of contributor's	s spouse (if any)			
	If contributor	is a child, law firm of parent(s) (if any)					

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	rm.	Total pages Schedule A(J)1: 33 of 38				
2 FILER NAME	DAVID M. PATRONELLA	3	Filer ID (Ethics Commission Filers)				
4 Date 10/25/2016	5 Full name of contributor Out-of-state PAC ID#: 7 Amount of contribution (\$)  16 Contributor address; City; State; Zip Code \$ 100.00						
	Contributor address; City; State; 201 LAVACA ST #534, AUSTIN, TX 787		\$ 100.00				
8 Contributor's p	principal occupation	9 Contributor's job title					
ATTORNEY							
10 Contributor's e	employer/law firm	11 Law firm of contributor's spo	ouse (if any)				
12 If contributor is	s a child, law firm of parent(s) (if any)						
Date	Full name of contributor	)#:)	Amount of contribution (\$)				
10/25/2016	Contributor address; City; State; 7 MARTIN CT, HOUSTON, TX 77055	Zip Code \$ 500.00					
Contributor's p	principal occupation	Contributor's job title					
TAX CONSU	LTANT						
	employer/law firm	Law firm of contributor's spe	ouse (if any)				
If contributor is	s a child, law firm of parent(s) (if any)						
Date	Full name of contributor	0#:)	Amount of contribution (\$)				
10/25/2016	Contributor address; City; State: 3350 McCUE RD, APT 1903, HOUSTON	Zip Code I, TX 77056	\$ 100.00				
Contributor's	principal occupation	Contributor's job title					
INSURANCE							
	employer/law firm	Law firm of contributor's sp	oouse (if any)				
If contributor is	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.

#### SCHEDULE A(J)1

The	e Instruction Guide explains how to complete this fo	1 Total pages Schedule A(J)1: 34 of 38	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	DAVID M. PATRONELLA		
4 Date	Full name of contributor	#:)	7 Amount of contribution (\$)
10/25/2016	6 Contributor address; City; State;	Zip Code	\$ 250.00
	1518 GARDENIA DR, HOUSTON, TX 77	018	
8 Contributor's pr	incipal occupation	9 Contributor's job title	
10 Contributor's en	nployer/law firm	11 Law firm of contributor's	s spouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor   out-of-state PAC ID		Amount of contribution (\$)
10/25/2016	Contributor address; City; State; 1138 WISTERWOOD DR, HOUSTON, T	Zip Code X 77043	\$ 250.00
Contributor's pr	incipal occupation	Contributor's job title	
RETIRED JUDG	GE, MEDIATOR		
Contributor's er	nployer/law firm	Law firm of contributor	s spouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		CODI
Date	Full name of contributor	D#:)	Amount of contribution (\$)
10/25/2016	Contributor address; City; State: 1506 HOLLY RIVER DR, HOUSTON, TX		\$ 100.00
Contributor's p	rincipal occupation	Contributor's job title	
RETIRED ATTO	ORNEY		
Contributor's er	nployer/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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#### SCHEDULE A(J)1

	T	he Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A(J)1: 35 of 38
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)
4	Date	5 Full name of contributor Out-of-state PAC ID#:	)	7 Amount of contribution (\$)
	10/25/2016	6 Contributor address; City; State; 1100 UPTOWN PARK BLVD, UNIT 272, H	Zip Code OUSTON, TX 77056	\$ 100.00
8	Contributor's p	principal occupation 9	Contributor's job title	
10	Contributor's e	employer/law firm	1 Law firm of contributor's	s spouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor Out-of-state PAC ID#:		Amount of contribution (\$)
	10/25/2016	Contributor address; City; State; 9219 KATY FWY, STE 220, HOUSTON, TX	Zip Code X 77024	\$ 250.00
	Contributor's p	principal occupation	Contributor's job title	
	ATTORNEY		<u>/</u>	
	Contributor's 6	employer/law firm	Law firm of contributor	s spouse (if any)
		S OF ROBERT W EUTSLER		
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date		)	Amount of contribution (\$)
	10/25/2016	RANNEY & LINDA McDONOUGH  Contributor address; City; State: 3 PIN OAK ESTES DR, BELLAIRE, TX 77	Zip Code /401	\$ 250.00
	Contributor's	principal occupation	Contributor's job title	
	Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		

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#### SCHEDULE A(J)1

	Tì	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1: 36 of 38			
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)			
4	Date	5 Full name of contributor	0#:)	7 Amount of contribution (\$)			
	10/25/2016	6 Contributor address; City; State; 1875 POST OAK PARK DR, APT 417, He	·	\$ 150.00			
8	Contributor's p	principal occupation	9 Contributor's job title				
•	ATTORNEY		•				
10		employer/law firm	11 Law firm of contributor	's spouse (if any)			
		LAW GROUP, PLLC		· · · · · · · · · · · · · · · · · · ·			
12		s a child, law firm of parent(s) (if any)					
_							
_	Date	Full name of contributes	2#	Amount of contribution (\$)			
		Full name of contributor  Out-of-state PAC II  LINEBARGER GOGGAN BLAIR & SAM					
	10/25/2016	Contributor address; City; State;	Zip Code	\$ 500.00			
		P.O. BOX 17428, AUSTIN, TX 78760					
	Contributor's r	principal occupation	Contributor's job title	1			
	LAW FIRM						
—		employer/law firm	Law firm of contributor	's spouse (if any)			
		R GOGGAN BLAIR & SAMPSON, LLP		-			
		s a child, law firm of parent(s) (if any)					
<del>-</del>	Date	Full name of contributor Out-of-state PAC	D#:)	Amount of contribution (\$)			
		PASCAL PIAZZA		(4)			
				¢ 050.00			
	10/27/2016	Contributor address; City; State:	·	\$ 250.00			
		523 N POST OAK LN, HOUSTON, TX 7	7024				
	Contributor's	principal occupation	Contributor's job title				
ĺ	ATTORNEY						
_		employer/law firm	Law firm of contributo	r's spouse (if any)			
_	If contributor i	s a child, law firm of parent(s) (if any)	1				
F							

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#### SCHEDULE A(J)1

		· · · · · · · · · · · · · · · · · · ·			
Th	ne Instruction Guide explains how to complete this fo	1 Total pages Schedule A(J)1: 37 of 38			
2 FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)		
10/27/2016	6 Contributor address; City; State; 101 ASBURY ST, HOUSTON, TX 77007	·	\$ 1,000.00		
8 Contributor's p	rincipal occupation WNER	9 Contributor's job title			
10 Contributor's e	mployer/law firm	11 Law firm of contributor's	s spouse (if any)		
12 If contributor is	a child, law firm of parent(s) (if any)				
Date	Full name of contributor	D#:)	Amount of contribution (\$)		
11/02/2016	Contributor address; City; State; P.O. BOX 8746, HOUSTON, TX 77206	Zip Code	\$ 500.00		
Contributor's p	rincipal occupation	Contributor's job title			
	mployer/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	D#:)	Amount of contribution (\$)		
11/30/2016	Contributor address; City; State: 525 WOODLAND ST, HOUSTON, TX 7		\$ 50.00		
·	rincipal occupation	Contributor's job title			
RETIRED	mpleyer/law firm	Law firm of contributes	's coouse (if any)		
Contributor's employer/law firm Law firm of contributor's spouse (if any)					
If contributor is	s a child, law firm of parent(s) (if any)				

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#### SCHEDULE A(J)1

		// ////						
	The instruction Guide explains how to complete this form.  1 Total pages Schedule A(J)1: 38 of 38							
2	FILER NAME	DAVID M. PATRONELLA		3 Filer ID (Ethics Commission Filers)				
4	Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)				
	11/30/2016	6 Contributor address; City; State; 1 SUGAR CK CTR BLVD, STE 925, SUG	Zip Code GAR LAND, TX 77478	\$ 100.00				
8	Contributor's p	rincipal occupation	9 Contributor's job title					
	LAW OFFICE	mployer/law firm IS OF JEFFREY S. REDDALL	11 Law firm of contributor	s spouse (If any)				
12	12 If contributor is a child, law firm of parent(s) (if any)							
	Date	Full name of contributor	D#:	Amount of contribution (\$)				
		Contributor address; City; State;	Z <sub>I</sub> p Code	\$ 200.00				
	Contributor's p	rincipal occupation	Contributor's job title					
	Contributor's e	mployer/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	D#:)	Amount of contribution (\$)				
		Contributor address; City; State:	Zip Code					
Contributor's principal occupation  Contributor's job title								
	Contributor's e	mployer/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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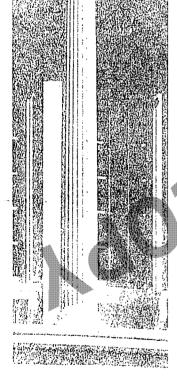
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



Rolltica//Legislative Affairs Department

> Edwin D. Hill Chairman

Sam J. Chilia Secretary-Treasurer



International Brotherhood of Electrical Workers:

900 Seventh Street, NW Washington, DC 20001

PH: 202.728.6046, FX: 202.728.6144

pewpoliticaldept@ibew.org

Form 945

and the second second in the second s

#### MEMORANDUM

I certify that the enclosed is a copy of the International Brotherhood of Electrical Workers Political Action Committee's statement or organization filed as required by law with the Federal Election Commission. The FEC identification number assigned is C00027342.

With best wishes, I am

Sincerely yours.

Salvatore (Sam) J. Chilia Secretary-Treasurer

SJC:mlm Opeiu #2

# STATEMENT OF

FEC FORM 1		ORGANIZ			Office Use Only
NAME OF     COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	112FE4M5	ere tamp and a consequence
International B	rotherho	od of:Electrical Work	ers Political Action (	Committee	
	<u> </u>	<u>i   ;                                   </u>		1 1 1 1 1	
ADDRESS (number a	nd street)	1900 Seventh St., N	W:	1 1 1 1 1	
(Check if a is changed	address 1)		<u> </u>	<u> </u>	<u> </u>
<b>3</b>	- 1	Waşhington, , , CITY ▲		DC STATE A	20001 - [ , , , ]
COMMITTEE'S E-MA	AL ADDRES	S			
(Check if a	address	[PACReports@it	pew.org. , , ,	; 1 [ ] 1 }	
COMMITTEE'S WEB  (Check if a is changed	PAGE ADD address 1)	Optional Second E-Mail Ad	dress		C. C. P.
2. DATE OS	3 01	2014		•	
3. FEC IDENTIFIC	DATION NUI	i energia di	C00027342	,	
4. IS THO STATEM	ALIVI 1 9	THEW (N) ON	AMENDED (A	•)	
Type or Print Name of Signature of Treasure	of Treasurer	Salvatore J. Chilia  Maddan  Tus, or incomplete information  NY CHANGE IN INFORMATI	may subject the person sign	Date 0.8	01° 2014
Office Use Only			For further information Federal Election Community Free 800-424-953	mission	FEC FORM 1 (Ravised 06/2012)

F	EC Fo	orm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
Cand		e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	;	This committee is an authorized committee, and is NOT a principal campaign committee. (Complet information below.)	e the candidate
Name Candid			11111
Candid Party /		Office tion Sought: House Senate President	State  District
(c)	а - в 	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candio			1 1 1 1 1
Party	Cor	mmittee:	
(d)			mocralic. ublican, etc.) Party.
Politi	cal A	Action Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a
			abor Organization
		In addition, this committee is a Lobbyist/Registrant PAC.	Soperative
(1)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre-committee. (i.e., nonconnected committee)	gated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	draising Representative:	unter-researcy displayed with transcriptions in a calculate or a fill Magel scalaure.
(g)	į	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(h)	li i	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two occumulttees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Con	nmittees Participating in Joint Fundraiser	
•	1.	FEC ID number C	j
	2.	FEC ID number C	en e
	3.	FEC ID number C	
	a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

	Γ	_							
		FEC Form  Vrite or Type Com	1 (Revised		**************************************		Page 3		
		•		lectrical Workers Political Acti	ion Committee				
	6.			Organization, Affiliated Commi		oresentative, or L	eadership PAC Sponsor		
	Unternational Brotherhood of Electrical Workers								
	L		<u> </u>						
		Mailing Address		900,7th Street, NW					
				[Waşhington]		DC	20001  -		
				CITY		STATE	ZIP CODE		
		Relationship:	Connected	d Organization & Affiliated Com	mittee	g Representative	Leadership PAC Sponsor		
	7.	Custodian of Rebooks and record	cis.	nify by name, address (phone n	umber optional) and posi	tion of the person	n in possession of committee		
		Mailing Address		900 7,th St					
				Washington , , , ,	1 : : : 1 1	DC L	20001		
		Title or Position		СІТҮ		STATE	ZIP CODE		
		Director, I	BEW Po	olit, , , , , , , , , , , , , , , , , , ,	Telephone nur	mber [202	J-[728]-[6046]		
<ol> <li>Treasurer: List the name and address (phone number optional) of the treasurer of the committee any designated agent (e.g., assistant treasurer).</li> </ol>						committee; and	the name and address of		
		Full Name of Treasurer	Salvato	re J. Chilia	<u> </u>	11111			
		Mailing Address		[900,7th,St, N.W.	<u></u>	1 1 1 1 1	111111		
					1 1 1 1 1 1 1 1	l_l_il_l_			
				[Washington		LDC L	200,01  -		
		Title or Position		CITY	,	STATE	ZIP CODE		
	1	Secretary/	T <sub>i</sub> re <u>asur</u> e		Telephone nun	nber <u>202</u>	-  7,28  -  6046		

FEC Form 1 (Rev	vised 02/2009)		Page <b>4</b>
Full Name of Designated Agent I I			: 1 : 1 1 1 <u>; </u>
Mailing Address	CITY	STATE	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Title or Position		Telephone number !!	- [
9. Banks or Other Deposi safety deposit boxes or i Name of Bank, Deposito		which the committee deposits funds,	holds accounts, rents
Ama	algamated Bank		<u> </u>
Mailing Address	1825,K,Sţreeţ, N,W.	DC DC	20006 ]-[ ; ; ;
Name of Bank, Deposito	CITY ry. etc.	STATE	ZIP CODE
L			11:11:11
Mailing Address			
	CITY	STATE	ZIP CODE

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME	DAVID M. PATRO	NELLA		3 Filer ID (Ethics Commission Filers)		
4 Date 06/15/2016	5 Payee name	OAK FOREST DE	MOCRATS	3			
6 Amount (\$)	7 Payee address;	City; State;	Zip Code				
\$ 40.00		5910 ACORN, HC	OUSTON, T	X 77092			
8 PURPOSE OF EXPENDITURE	(a) Category (See Cate	egories listed at the top of this	schedule)		outside of Texas. Complete Schedule T. in, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF		ficeholder name		Office sought	Office held		
Date 07/19/2016	Payee name	STEPHANIE C	CHRAN				
Amount (\$) Payee address; City; State; Zip Code							
\$ 29.14	2208 SHAKESPEAR, HOUSTON, TX 77030				30		
PURPOSE OF EXPENDITURE		tegories listed at the top of this			utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF		ficeholder name		Office sought	Office held		
Date	Payee name						
08/09/2016		TONY'S RESTA	URANT				
Amount (\$)	Payee address;	City; State;	Zip Code				
\$ 49.64		3755 RICHMON	D AVE, HO	DUSTON, TX 77	046		
PURPOSE OF EXPENDITURE		tegories listed at the top of this		· —	outside of Texas. Complete Schedule T. in, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/O	Complete ONLY if direct						
ATTACH ADDITIONAL COPIES 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/Politica Credit Card Payment	Committee Legal Services	Office Overhe Polling Exper pense Printing Expe	nse es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 5	2 FILER NAME DAVID M. PATRONELLA  3 FILER ID (Ethics Commission Filers)					
4 Date 08/16/2016	5 Payee name MICRO CENTER					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$ 552.04	5305 S. RICE AVE, HOUSTON, TX 77081					
8 PURPOSE OF EXPENDITURE				itside of Texas. Complete Schedule T. , TX, officeholder living expense		
9 Complete ONLY if direct	Candidate / Officeholder nam	е	Office sought	Office held		
expenditure to benefit C/OF	Payee name	77E/A				
08/29/2016	J & N EN	TERPRISES, INC	•			
Amount (\$) \$ 1,175.60	,	State: Zip Code 34th ST, HOUSTC	ON, TX 77018	CUP		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the	e top of this schedule)	$\overline{}$	tside of Texas. Complete Schedule T. , TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder nam	е	Office sought	Office held		
Date	Payee name					
09/02/2016	U.S. POS	TMASTER				
Amount (\$)	Payee address; City;	State; Zip Code				
\$ 282.00	3816 N. SHEPHERD, HOUSTON, TX 77018					
Category (See Categories listed at the top of this schedule)  PURPOSE OF EXPENDITURE  FUNDRAISING EXPENSE			$\overline{}$	utside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/O	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
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gilt/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)

	Candidate/Officeholder/Politica	•	Salaries/Wages/Contract Labor	Other (enter a category not listed above)	
(	Credit Card Payment	The Instruction Guide explair	is how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME DAVID M. PATRO	NELLA	3 Filer ID (Ethics Commission Filers)	
4	Date 09/17/2016	5 Payee name TEJANO DEMOCF	RATS		
6	Amount (\$)	7 Payee address; City; State; 2	ip Code		
	\$ 175.00	3213 HOUSTON A	VE, HOUSTON, TX 77009		
8	•	(a) Category (See Categories listed at the top of this			
١.	PURPOSE OF		( <del>771</del> )	iside of Texas. Complete Schedule T.  TX. officeholder living expense	
	EXPENDITURE	ADVERTISING	Check if Austin		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Γ	Date	Payee name			
	09/18/2016	GOLDEN SEAF	DOC		
	Amount (\$)	Payee address; City; State; 2	ip Code		
	\$ 88.63	2407 AIRLINE	DR, HOUSTON, TX 77009		
	PURPOSE OF	Category (See Categories listed at the top of this	Check if travel out	tside of Texas. Complete Schedule T.	
	EXPENDITURE	FOOD / BEVERAGE EXPENSE			
	Complete ONLY if direct expenditure to benefit C/Or	Candidate / Officeholder name	Office sought	Office held	
Г	Date	Payee name			
	09/21/2016	TONY'S RESTAL	JRANT		
	Amount (\$)	Payee address; City; State; 2	Žip Code		
	\$ 46.79	3755 RICHMONI	O AVE, HOUSTON, TX 770	046	
	PURPOSE	Category (See Categories listed at the top of this	<u></u>	itside of Texas. Complete Schedule T.	
	OF EXPENDITURE	FOOD / BEVERAGE EXPENSE		, TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held	
F	ATTACH ADDITIONAL COPIES 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
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Waces/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
Charge and Expense and Listed shows)

Candidate/Officeholder/Politica Credit Card Payment				
	The Instruction Guide explains how to compl			
1 Total pages Schedule F1: 5	2 FILER NAME DAVID M. PATRONELLA	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
09/28/2016	U.S. POSTMASTER			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$ 210.80	1500 HADLEY ST, HOUSTON,			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.		
OF		Check if Austin, TX, officeholder living expense		
EXPENDITURE	FUNDRAISING EXPENSE			
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
10/06/2016	U.S. POSTMASTER			
Amount (\$)	Payee address; City; State; Zip Code			
\$ 96.00	3816 N. SHEPHERD, HOUSTON, TX 77018			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE		Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	FUNDRAISING EXPENSE	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			
10/14/2016	STEPHANIE NYCUM			
Amount (\$)	Payee address; City; State; Zip Code			
\$ 163.98	6637 SYLVAN RD, HOUSTON, TX 77023			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE		Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	REIMBURSEMENT FOR MATERIALS	Check if Austin, TX, officeholder fiving expense		
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES 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/Politica Credit Card Payment	g Expense Event Expense Loan Repayment/Reimt office Overhead/Renta Office Overhead/Renta Polling Expense Food/Beverage Expense Polling Expense Printing Expense Pollifice Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra Payment		head/Rental Expense ense pense ages/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 explain	s how to co	implete this form.	
1 Total pages Schedule F1: 5	Total pages Schedule F1: 2 FILER NAME 5 DAVID M. PATRONELLA 3 Filer ID (Ethics Commission Filers)				
4 Date 12/04/2016					
6 Amount (\$)	7 Payee address;	City; State; Z	ip Code		
\$ 70.00		N. SHEPHERD, HO	OUSTON,	TX 77018	
8	(a) Category (See C	ategories listed at the top of this s	schedule)	(b) Description	outside at Texas. Complete Schedule T.
PURPOSE OF EXPENDITURE	FUNDRAIS	ING EXPENSE			tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF		officeholder name		Office sought	Office held  RECORDER'S MEMORANDUM:
Date	Payee name				At the time of recordation, this instrument was found to be inadequate for the best photographi
12/09/2016		STEPHANIE NY	CUM		reproduction because of illegibility, carbon o photo copy, discolored paper, etc. All blockouts
Amount (\$)	Payee address	; City; State; Z	Zip Code		additions and changes were present at the time the instrument was filed and recorded.
\$ 500.00	\$ 500.00 6637 SYLVAN RD, HOUSTON, TX 77023				
PURPOSE OF EXPENDITURE		alegories listed at the top of this			outside of Texas. Complete Schedule T. lin, TX, officeholder living expense
Complete ONLY if direct					
Date	Payee name				
12/29/2016		THINGS REMEM	BERED		
Amount (\$)	Payee address	; City; State;	Zip Code		
\$ 94.76	\$ 94.76 500 S. BAILEY RD, N. JACKSON, OH 44451				
PURPOSE	Category (See Categories listed at the top of this schedule)  Description  Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE	GIFT/AWAF	RDS/MEMORIALS E	XPENSE	Check If Aus	titin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OI		Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					