

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) <p style="text-align: center; font-size: 1.2em;"><b>9419</b></p>	2 Total pages filed: <p style="text-align: center; font-size: 1.2em;"><b>5</b></p>															
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 0.8em;">MS / MRS / MR</td> <td style="width:30%; font-size: 0.8em;">FIRST</td> <td style="width:10%; font-size: 0.8em;">MI</td> <td style="width:30%; font-size: 0.8em;">LAST</td> <td style="width:10%; font-size: 0.8em;">SUFFIX</td> </tr> <tr> <td>Mr.</td> <td>Raul</td> <td>A.</td> <td>Gonzalez</td> <td></td> </tr> <tr> <td style="font-size: 0.7em;">NICKNAME</td> <td style="font-size: 0.7em;">LAST</td> <td colspan="3" style="font-size: 0.7em;">SUFFIX</td> </tr> </table>	MS / MRS / MR	FIRST	MI	LAST	SUFFIX	Mr.	Raul	A.	Gonzalez		NICKNAME	LAST	SUFFIX			<p style="text-align: center; font-weight: bold; font-size: 0.8em;">OFFICE USE ONLY</p> <div style="border: 1px solid black; padding: 5px; font-size: 0.7em;">                 Date Received  <div style="text-align: center; font-weight: bold; font-size: 1.5em; margin: 10px 0;">                     FILED FOR REPORT                      15                      7/16/19 5:50 PM                      STATE ETHICS COMMISSION                      TEXAS                 </div>                 Date Hand Delivered or Date Postmarked                  Receipt #                  Amount \$                  Date Processed                  Date Imaged             </div>	
MS / MRS / MR	FIRST	MI	LAST	SUFFIX														
Mr.	Raul	A.	Gonzalez															
NICKNAME	LAST	SUFFIX																
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 0.8em;">ADDRESS</td> <td style="width:10%; font-size: 0.8em;">PO BOX</td> <td style="width:10%; font-size: 0.8em;">APT / SUITE #</td> <td style="width:20%; font-size: 0.8em;">CITY</td> <td style="width:10%; font-size: 0.8em;">STATE</td> <td style="width:20%; font-size: 0.8em;">ZIP CODE</td> </tr> <tr> <td colspan="6">P.O. Box 40263 Austin, TX 78704</td> </tr> </table>	ADDRESS	PO BOX	APT / SUITE #	CITY	STATE	ZIP CODE	P.O. Box 40263 Austin, TX 78704										
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NICKNAME	LAST	SUFFIX																
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;"><input type="checkbox"/> January 15</td> <td style="width:25%;"><input type="checkbox"/> 30th day before election</td> <td style="width:25%;"><input type="checkbox"/> Report</td> <td style="width:25%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Candidate Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report Attach C/OH-FR</td> </tr> </table>			<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Report	<input type="checkbox"/> 15th day after campaign treasurer appointment (Candidate 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							
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Month	Day	Year	THROUGH	Month	Day	Year												
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11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; font-size: 0.8em;">ELECTION DATE</td> <td colspan="3" style="width:60%; font-size: 0.8em;">ELECTION TYPE</td> </tr> <tr> <td style="font-size: 0.7em;">Month Day Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td></td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>			ELECTION DATE	ELECTION TYPE			Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description		<input type="checkbox"/> General	<input type="checkbox"/> Special				
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12 OFFICE	13 OFFICE SOUGHT (if known) Justice of the Peace, Travis Cty.  Pct. 4																	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME **Raul A. Gonzalez** 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.

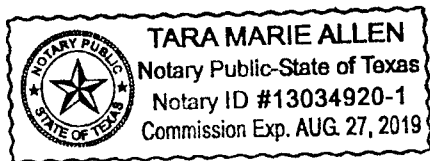
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	None
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) UNLESS ITEMIZED	\$	-0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	-0-
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED	\$	-0-
	4. TOTAL POLITICAL EXPENDITURES	\$	602
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	166
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	-0-

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.



*Raul Gonzalez*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP - SEAL ABOVE

Sworn to and subscribed before me, by the said Raul Gonzalez this the 15 day of July, 20 19, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Tara Allen  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <b>Raul A. Gonzalez</b>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 82
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 checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 502
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	\$

# 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 Expenses |
| 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
1	Raul A. Gonzalez	
<b>4</b> Date	<b>5</b> Payee name	
1/15/2019	USPS	
<b>6</b> Amount (\$)	<b>7</b> Payee address: City: State: Zip Code	
\$82.00	3903 S. Congress Ave. Austin, TX 78704	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	
	Mailbox - rental expense	
	<b>(b)</b> Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
n/a	n/a	
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	
n/a	n/a	
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

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

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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.

<b>1</b> Total pages Schedule G: <b>1</b>	<b>2</b> FILER NAME <b>Raul A. Gonzalez</b>	<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <b>2/26/2019</b>	<b>5</b> Payee name <b>TCDP</b>		
<b>6</b> Amount (\$) <b>\$ 370.00</b> <input type="checkbox"/> Reimbursement from political contributions intended <input checked="" type="checkbox"/>	<b>7</b> Payee address: City: State: Zip Code <b>1311 B East 6th St., Austin TX 78702</b>		
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense - JBR dinner</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date <b>03/07/2019</b>	Payee name <b>George Morales Campaign</b>		
Amount (\$) <b>\$ 150.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended <input type="checkbox"/>	Payee address: City: State: Zip Code <b>4704 Cabob Austin, TX 78744</b>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Contribution by Officeholder</b>	(b) 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 <b>n/a</b>	Payee name <b>n/a</b>		
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended <input type="checkbox"/>	Payee address: City: State: Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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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