Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 20

OFFICE USE ONLY

Date Received ✓

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: DR | FIRST: JO ANN | MI:

NICKNAME: | LAST: GONZALEZ | SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 14 KINGS HEATH SAN ANTONIO TX 78015

5 CAMPAIGN TREASURER NAME

TITLE: MR | FIRST: HERBERT T. | MI:

NICKNAME: HERB | LAST: RIPPA | SUFFIX: JR

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 4903 BELLE ELLEN DR SAN ANTONIO TX 78229

7 CAMPAIGN TREASURER PHONE

AREA CODE: (210) | PHONE NUMBER: 614 0118 | EXTENSION:

8 REPORT TYPE

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year: 1 / 23 / 03 THROUGH Month Day Year: 4 / 1 / 03

10 ELECTION

ELECTION DATE Month Day Year: 5 / 3 / 03

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any):

12 OFFICE SOUGHT (if known): CITY COUNCIL DISTRICT 8

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

**14 C/OH NAME** JOANN GONZALEZ

**15 ACCOUNT #** (Ethics Commission filers)

**16 NOTICE FROM POLITICAL COMMITTEE(S)**

•• This box is for notice of political expenditures 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 |
|---|---|
| ☐ GENERAL | COMMITTEE ADDRESS |
| ☐ SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME |
| ☐ additional pages | COMMITTEE CAMPAIGN TREASURER ADDRESS |

**17 NO REPORTABLE ACTIVITY**

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

**18 CONTRIBUTION TOTALS**

| | | |
|---|---|---|
| | 1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | $ 3073.50 |
| | 2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 14709.50 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED | $ 1303.79 |
| | 4. **TOTAL POLITICAL EXPENDITURES** | $ 14709.50 |
| OUTSTANDING LOAN TOTALS | 5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ |

**19 AFFIDAVIT**

NOTARY PUBLIC STATE OF TEXAS
KRISTINA M. HUGHES
Notary Public
STATE OF TEXAS
My Comm. Exp. 01-13-2007

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.

Jo Ann Gonzalez
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jo Ann Gonzalez, this the 1st day of April, 20 03, to certify which, witness my hand and seal of office.

| Kristina M Hughes | Kristina M Hughes | ASR Specialist/SACA |
|---|---|---|
| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#: ) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/5/03 | CELEBRATION PROPERTIES<br>11123 WOODWATERS WAY SAT 78249 | $50.00 | |

9 Principal occupation (Optional): 10 Employer (Optional):

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/6/03 | LAW OFFICES OF ADA RIOJAS<br>110 E NUEVA SAT 78204 | $200.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/27/03 | VOGT ENTERPRISES<br>P.O. BOX 17142 SAT 78217 | $200.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/27/03 | ALAMO CITY OPTICAL<br>1721 SW MILITARY SAT 78221 | $150.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/27/03 | ALAMO CITY OPTICAL<br>1939 NE LOOP 410 SU 200 SAT. 78221 | $150.00 | |

Principal occupation (Optional): Employer (Optional):

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

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|---|---|---|---|
| 2/27/03 | LAW OFFICES of SHAWN BROWN<br>115 E. TRAVIS SAT 78205 | $320.00 | |

9 Principal occupation (Optional) | 10 Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/27/03 | RAYMOND DELEON<br>152 NARRIGAN #3 SAT 78209 | $50.00 | |

Principal occupation (Optional) | Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/27/03 | LINDA PEDROSA<br>6002 WARRYUM SAT. 78238 | $150.00 | |

Principal occupation (Optional) | Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/27/03 | ROSIE PADILLA<br>9307 VICTORY PASS SAT 78240 | $100.00 | |

Principal occupation (Optional) | Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 2/27/03 | S.A. HISPANIC POLICE OFF. ASSN<br>P.O. BOX 890716 SAT 78283 | $150.00 | |

Principal occupation (Optional) | Employer (Optional)

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|---|---|---|---|
| 2/27/03 | CONSUELO KICKBUSH<br>11807 JARUS DR. SAT 78253 | $100.00 | |
| Principal occupation (Optional): | Employer (Optional): | | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | MARILYN JASSO<br>102 OSAGE SAT 78207 | $81.00 | |
| Principal occupation (Optional): | Employer (Optional): | | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | ALEJANDRO PEREZ<br>5810 BOGART SAT 78240 | $55.00 | |
| Principal occupation (Optional): | Employer (Optional): | | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | ROLAND HERNANDEZ<br>7130 SPRINGFOREST SAT 78249 | $50.00 | |
| Principal occupation (Optional): | Employer (Optional): | | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | MARIA TAFOLLA<br>4226 HAVENVIEW SAT 78228 | $140.00 | |
| Principal occupation (Optional): | Employer (Optional): | | |

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|---|---|---|---|
| 3/2/03 | MANUEL GARZA<br>12830 CASTLE BEND SAT 78230 | $50.00 | |

| 9 Principal occupation (Optional) | 10 Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | ENRIQUE PRIETO<br>5831 DAN DURVEA SAT. 78240 | $100.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | DANNY VELA<br>9251 WINWARD TRACE SAT 78254 | $99.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | GLORIA MORALES<br>61 GRANBERG CIR SAT 78218 | $72.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | EVA DEFRANCESO<br>9414 WHISPER POINT SAT 78240 | $150.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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|---|---|---|---|
| 3/2/03 | FRANCES HERNANDEZ<br>3431 SUNLIT GROVE SAT 78247 | $56.00 | |
| 9 Principal occupation (Optional) | 10 Employer (Optional) | | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | ROSIE PADILLA<br>9307 Victory PASS SAT 78240 | $122.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | PSR SECURITY<br>3700 FREDRICKSBURG RD Ste 203 SAT 78201 | $150.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | Speedy GONZALEZ<br>14 KINGS HEATH SAT 78257 | $480 | Toy Race Cars, Child Guard. |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | Rudys BAR-B-Q<br>IH10 & BOERNE STG RD SAT 78015 | $46 | CASE of BAR-B-Q SAUCE |
| Principal occupation (Optional) | Employer (Optional) | | |

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|---|---|---|---|
| 3/2/03 | ALAMO CITY OPTICAL<br>1721 MILITARY SAT 78221 | $1200.00 | GIFT SETS EYEGLASS CLNR CANDY 300 @ $4 |

| 9 Principal occupation (Optional) | 10 Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | Rudys BAR-B-Q<br>110 & Boerne Stg Rd SAT 78015 | $200.00 | RENT FOR CAMPAIGN HQ |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | ALICE FURNITURE SHOP<br>610 WILDEBRAND SAT 78212 | $507.00 | FURNITURE FOR AUCTION |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/3 | LONESTAR ANTIQUES<br>1795 MAIN BOERNE TX 78208 | $ | ANTIQUES FOR AUCTION |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | ALAMO CITY OPTICAL<br>1721 S.W. MILITARY | $100 | SUNGLASSES FOR AUCTION |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

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|---|---|---|---|
| 3/2/03 | MARY MARTINEZ<br>2232 W. KINGS HWY SAT 78201 | $150. | BRACELET FOR AUCTION |

| 9 Principal occupation (Optional) | 10 Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | LAW OFFICES OF JOE PONCE<br>110 ENCINA SAT 78204 | $100 | 2 SPURS TICKETS FOR AUCTION |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/2/03 | SERGIO'S HAIR SALON<br>15102 SAN PEDRO SAT 78232 | $120 | HAIR CUT FOR AUCTION |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/13/03 | JOHN V. DEMARTINO<br>203 AUBURN CROSSING SAT 78006 | $500.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/13/03 | JOHN V. DEMARTINO<br>203 AUBURN CROSSING SAT 78006 | $100.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

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|---|---|---|---|
| 3/13/03 | CELEBRATION PROPERTIES<br>11123 WOODWATERS WAY SAT 78249 | $225.00 | |

9 Principal occupation (Optional) | 10 Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/13/03 | JACK STALSBY<br>48 CAMPIONS LN SAT 78257 | $225.00 | |

Principal occupation (Optional) | Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/13/03 | CHARLES ALLEN<br>16019 UNIVERSITY OAK SAT 78249 | $225 | |

Principal occupation (Optional) | Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/13/03 | LEIGH M SCOTT<br>7 EATON GREEN DR SAT 78257 | $125.00 | |

Principal occupation (Optional) | Employer (Optional)

| Date | Full name of contributor ☐ out-of-state PAC (ID#: ) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/13/03 | ALEX HERRERA<br>4 ARNOLD PALMER SAT 78257 | $225.00 | |

Principal occupation (Optional) | Employer (Optional)

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|---|---|---|---|
| 3/13/03 | MARCOS STABLES<br>5947 OLD CAMPBELLS SAT 78257 | $225.00 | |

| 9 Principal occupation (Optional) | 10 Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | LAW OFFICES OF RUDY VASQUEZ<br>1910 BROADWAY SAT 78215 | $225.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | LAW OFFICES OF AIDA RIOJAS<br>110 E NUEVA SAT 78204 | $225.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | MICHAEL DEATN RAGE<br>3 KINGS HEATN SAT 78257 | $100.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | GLEN MCCLAUGHERTY<br>13 KINGS HEATN SAT 78257 | $225.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 12

2 FILER NAME: JOANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | MARIA COPANDO<br>2232 W. KINGS HWY SAT 78201 | $130.00 | |

9 Principal occupation (Optional): 10 Employer (Optional):

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | EDWARD VALDES<br>5315 FREDRICKSBURG SAT 78229 | $125.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | HERBERT T. RUPPA JR<br>4903 Belle Ellen SAT 78229 | $100.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/17/03 | SHANE MITCHELL<br>12606 MOUNTAIN ALDER SAT 78216 | $225.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/17/03 | ANDREW GUERRA<br>14219 HUNTER HILL SAT 78217 | $125.00 | |

Principal occupation (Optional): Employer (Optional):

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 12

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Full name of contributor / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/17/03 | BEVERLY GUERRA<br>14219 HUNTGRHILL SAT 78258 | $125.00 | |

9 Principal occupation (Optional): 10 Employer (Optional):

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/17/03 | KIRK COLYER<br>13290 HUNTERS VIEW SAT 78230 | $200.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/17/03 | ROBERT RUBIO<br>10830 BRIARWAY SAT 78217 | $80.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/17/03 | RODRIGUEZ PROPERTIES<br>3678 HIDDEN DR SAT 78217 | $125.00 | |

Principal occupation (Optional): Employer (Optional):

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/19/03 | R.G. WALLACE<br>12 CHAMPIONS LN SAT 78257 | $250.00 | |

Principal occupation (Optional): Employer (Optional):

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 12

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/14/03 | AFFARO & JOHNS INVESM. / 110 E. NUEVA SAT 78204 | $60.00 | |

| 9 Principal occupation (Optional) | 10 Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 3/28/03 | ENCARNCION GUERRA / 2 BISHOPS GREEN SAT 78257 | $50.00 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 4/1/03 | BART KOONTZ / 829 CONTOUR SAT 78212 | $100 | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| | | | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| | | | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

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# POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 2

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 2/4/03 | ALLIED<br>3700 BLANCO RD 78212 | $72.82 |

8 Purpose of payment (See instructions regarding type of information required.): BANNER.

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/2/03 | LEON SPRINGS DANCE HALL<br>24135 IH 10 W. SAT 78249 | $1947.81 |

Purpose of payment (See instructions regarding type of information required.): FOOD FOR FUND RAISER.

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/14/03 | SA CHAMBER OF COMMERCE<br>P.O BOX 1628 SAN Antonio TX 78296 | $150 |

Purpose of payment (See instructions regarding type of information required.): TABLE AT GET TO KNOW CAND.

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/15/03 | PETE GRANATO<br>119 PINEWOOD SAT 78216 | $1200.00 |

Purpose of payment (See instructions regarding type of information required.): BAND FOR FUND RAISER

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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# POLITICAL EXPENDITURES

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 2

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 3/20/03 | S.A. NEWS<br>P.O. BOX 240022 SAT 78224 | $150 |

8 Purpose of payment (See instructions regarding type of information required.): NEW AD. FOR CAMPAIGN

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/27/03 | DOMINION COUNTRY CLUB<br>ONE DOMINION DR. SAT 78257 | $290.57 |

Purpose of payment (See instructions regarding type of information required.): DINNER FOR FUND RAISER

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| | | |

Purpose of payment (See instructions regarding type of information required.)

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| | | |

Purpose of payment (See instructions regarding type of information required.)

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 4

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Purpose of expenditure (See instructions regarding type of information required.) | 8 Amount ($) | Reimbursement from political contributions intended |
|---|---|---|---|---|
| 1/16/03 | J&A PHOTOGRAPHY<br>7515 PIPERS RUN SAT 78251 | PHOTOS OF CANDIDATE | $130.00 | ☒ |
| 1/24/03 | PRINTING & DESIGNS.<br>4536 W. COMMERCE SAT 78237 | 300 4x6 POLITICAL CARDS. | $145.63 | ☒ |
| 1/30/03 | ALLIED ADS<br>3700 BLANCO Rd. SAT 78212 | POLITICAL SIGNS | $860.88 | ☒ |
| 2/4/03 | OFFICE MAX<br>12635 IH 10W Su. 525 SAT 78230 | OFFICE SUPPLIES | $142.30 | ☒ |
| 2/5/03 | CADILLAC RESTURANT<br>212 S. FLORES SAT 78204 | FOOD & DRINKS TO ANNOUNCE CANDID. | $130.00 | ☒ |

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 4

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Purpose of expenditure (See instructions regarding type of information required.) | 8 Amount ($) | Reimbursement from political contributions intended |
|---|---|---|---|---|
| 2/5/03 | CADILLAC RESTRURANT<br>212 S. FLORES SAT 78204 | FOOD & DRINKS TO ANNOUNCE CANDID. | $245.80 | ☒ |
| 2/6/03 | PRINTING & DESIGNS.<br>4536 W. COMMERCE SAT 78237 | 400 4X6 CARDS 1000 PUSH CARDS | $277.24 | ☒ |
| 2/12/03 | ALLIED.<br>3700 BLANCO RD SAT 78212 | SIGNS | $868.12 | ☒ |
| 2/18/03 | USPS<br>CEDAR ELM STA SAT 78249 | STAMPS | $148 | ☒ |
| 2/22/03 | USPS<br>CEDAR ELM STA SAT 78249 | STAMPS | $185 | ☒ |

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

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1 Total pages Schedule G: 4

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Purpose of expenditure (See instructions regarding type of information required.) | 8 Amount ($) | Reimbursement from political contributions intended |
|---|---|---|---|---|
| 2/27/03 | USPS<br>CEDAR ELM STA. 78249 | STAMPS | $185 | ☒ |
| 2/28/03 | USPS<br>CEDAR ELM STA SAT 78249 | POSTAGE | 194.35 | ☒ |
| 2/28/03 | OFFICE MAX<br>12635 IH 10 W Su 525 SAT 78230 | SUPPLIES | 58.16 | ☒ |
| 2/22/03 | P & D<br>4536 W. COMMERCE SAT 78237 | PRINTING | 53.94 | ☒ |
| 2/4/03 | SECURITY CONNECTION<br>4823 PARMENTER DR. SAT 78217 | | $175 | ☒ |

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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1 Total pages Schedule G: 4

2 FILER NAME: JO ANN GONZALEZ

3 ACCOUNT # (Ethics Commission filers):

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Purpose of expenditure (See instructions regarding type of information required.) | 8 Amount ($) | Reimbursement from political contributions intended |
|---|---|---|---|---|
| 2/14/03 | USPS<br>CEDAR ELM STA SAT 78250 | POSTAGE | 51.23 | ☒ |
| 3/8/03 | OFFICE MAX<br>12635 IH10 W Sa. 525 SAT 78230 | OFFICE SUPPLIES, COPIES | $80.29 | ☒ |
| 3/8/03 | ALDO S.<br>8539 FREDRICKSBURG SAT 78229 | CAMPAIGN DINNER | $110.42 | ☒ |
| | | | | ☐ |
| | | | | ☐ |

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