

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: 8
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3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mary P NICKNAME LAST SUFFIX Patti Radle	OFFICE USE ONLY Date Received 01-09-17P02:12 FILE Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1202 Tampico Street San Antonio Tx 78207 <input type="checkbox"/> change of address	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 225-6913	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Joanne NICKNAME LAST SUFFIX Sanchez	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 615 Brady San Antonio Tx 78207	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 226-3898	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 7 / 1 / 2016 THROUGH 12 / 31 / 2016	
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special / /	
12 OFFICE	OFFICE HELD (if any) SAISD Trustee District 5	13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Patti Radle

15 ACCOUNT # (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

GENERAL

SPECIFIC

COMMITTEE NAME

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 Sch.F= \$118.39
Sch.I= \$1,917.84 \$ 2,036.23

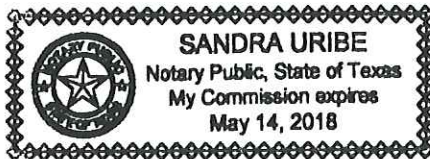
CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 1,889.58

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.

Patti Radle

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Patti Radle, this the 9th day of January, 20 17, to certify which, witness my hand and seal of office.

Sandra Uribe

Signature of officer administering oath

Sandra Uribe

Printed name of officer administering oath

Community Relations Specialist

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME **Patti Radle**

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ - 0 -
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ - 0 -
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ - 0 -
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$ - 0 -
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 118.39
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ - 0 -
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ - 0 -
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ - 0 -
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ - 0 -
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ - 0 -
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1,917.84
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ - 0 -

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date July-Dec, 2116	5 Payee name BBVA Bank	
6 Amount (\$) \$57.00	7 Payee address; City; State; Zip Code 218 S. Zarzamora St., San Antonio, Texas 78207	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Fees for monthly paper bank statements.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/11/2016	Payee name HEB	
Amount (\$) \$35.39	Payee address; City; State; Zip Code 108 N. Rosillo, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food for bond presentation at Lanier HS.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/18/2016	Payee name Linda's Mexican Restaurant	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 1424 Guadalupe Street, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T) Tacos for block walkers for bond.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 4	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 8/11/2016	5 Payee name SAISD Foundation
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6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 141 Lavaca, SA, Texas 78205
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8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Student support
	Date: 8/21/2016; Payee name: HEB	

Date: 8/21/2016	Payee name: HEB
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Amount (\$): \$108.08	Payee address; City; State; Zip Code: 108 N. Rosillo, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) gift/contribution	(b) Description (See instructions regarding type of information required.) School staff treats to start school year.
	Date: 8/22/2016; Payee name: HEB	

Date: 8/22/2016	Payee name: HEB
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Amount (\$): \$148.76	Payee address; City; State; Zip Code: 108 N. Rosillo, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) gift/contribution	(b) Description (See instructions regarding type of information required.) School staff treats to start school year.
	Date: 8/22/2016; Payee name: HEB	

Date: 9/20/2016	Payee name: R.J. Publications
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Amount (\$): \$300.00	Payee address; City; State; Zip Code: P.O. Box 1692, Helotes, Texas 78023
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PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Ad for Lanier High School program.
	Date: 9/20/2016; Payee name: R.J. Publications	

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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1 Total pages Schedule I: 2 of 4	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9/22/2016	5 Payee name SAISD Foundation
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 141 Lavaca, SA, Texas 78205
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8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Student support
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Date 11/1/2016	Payee name Project Quest
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 114 S.W. 24th Street, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Donation for fundraiser.
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Date 12/3/2016	Payee name Sidney Lanier Scholarship Dance of Class of '74
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 502 Rosillo, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) gift/contribution	(b) Description (See instructions regarding type of information required.) School staff treats to start school year.
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Date 11/9/2016	Payee name Caesar Chavez Legacy & Education Fund
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 1504 E. Commerce St., San Antonio, Texas 78205
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PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Donation for Thanksgiving in the Barrio.
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 3 of 4	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11/26/2016	5 Payee name Chile Bowl Scholarship Dance	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1915 N. Main, San Anontio, Texas 78212	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Scholarship support for students.
Date 12/9/2016	Payee name SA2020	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 123 Heiman, San Antonio, Texas 78205	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Donation for education research & data prep..
Date 12/12/2016	Payee name HEB	
Amount (\$) \$164.46	Payee address; City; State; Zip Code 6818 S. Zarzamora, San Antonio, Texas 78224	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) gift/contribution	(b) Description (See instructions regarding type of information required.) Cookies for school staff members.
Date 12/13/2016	Payee name HEB	
Amount (\$) \$46.54	Payee address; City; State; Zip Code 1601 Nogalitos St., San Antonio, Texas 78204	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) gift/contribution	(b) Description (See instructions regarding type of information required.) Cookies for school staff members.

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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1 Total pages Schedule I: 4 of 4	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/14/2016	5 Payee name Fabulous Choreography	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1810 Colima St., San Anontio, Texas 78207	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) contribution	(b) Description (See instructions regarding type of information required.) Donation for Lanier High School's Cheer Team trip to Dallas for competition.
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)

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