

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form. Revised 7/20/2012 to separate Sch. F & I.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Mary		P
	NICKNAME	LAST	SUFFIX
	Patti	Radle	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	1202 Tampico Street		San Antonio Texas 78207
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(210)	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 Texas 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 checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
			<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)
			<input type="checkbox"/> Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day	Year
	7	1	2012
	THROUGH	Month	Day
		12	31
			2012
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)		13 OFFICE SOUGHT (if known)
	SAISD Trustee District 5		
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	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		
	None		
	Address / PO Box; Apt. / Suite #; City; State; Zip Code		
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

Patti Radle

16 ACCOUNT # (Ethics Commission Filers)

17 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

18 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)

\$ 750.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ -0-

4. TOTAL POLITICAL EXPENDITURES
Schedule F = \$455.46
Schedule I = \$2,571.97

\$ 3,027.43

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 13,883.86

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ -0-

19 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.

"Mary Patricia Radle"

Patti Radle

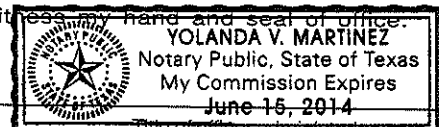
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Patti Radle, this the 11th day of Jan., 20 13, to certify which, with

Yolanda V. Martinez
Signature of officer administering oath

Yolanda V. Martinez
Printed name of officer administering oath



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Patti Radle

3 ACCOUNT # (Ethics Commission Filers)

4 Date

11/29/2012

5 Full name of contributor

out-of-state PAC (ID#: _____)

Charles C. Butt

7 Amount of contribution (\$)

\$750.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

335 King William, San Antonio, Texas 78204

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Owner - HEB Foods

10 Employer (See Instructions)

see #9

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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 of 2	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8/16/2012	5 Payee name SW Airlines	
6 Amount (\$) \$312.80	7 Payee address; City; State; Zip Code Southwest Airlines.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out of District	(b) Description (If travel outside of Texas, complete Schedule T) Flight from Phoenix to SA in order to attend special called Board Meeting (meeting called in middle of vacation)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/16/2012	Payee name Constant Contact (reimburse Patti & Rod Radle)	
Amount (\$) \$63.90	Payee address; City; State; Zip Code 1601 Trapelo Road, Suite 329, Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) 2 month service for bulk internet distribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/29/2012	Payee name Constant Contact (reimburse Patti & Rod Radle)	
Amount (\$) \$31.95	Payee address; City; State; Zip Code 1601 Trapelo Road, Suite 329, Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) 1 month service for bulk internet distribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/30/2012	Payee name BBVA Compass Bank	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 218 S. Zarzamora, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) For August Bank Statement
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**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: 2 of 2	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date Sept. 30, 2012	5 Payee name BBVA Compass Bank	
6 Amount (\$) \$3.00	7 Payee address; City; State; Zip Code 218 S. Zarzamora, 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) For Sept. Bank Statement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date Oct. 31, 2012	Payee name BBVA Compass Bank	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 218 S. Zarzamora, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) For Oct. Bank Statement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date Nov. 29, 2012	Payee name Office Depot	
Amount (\$) \$37.81	Payee address; City; State; Zip Code 2321 SW Military, San Antonio, Texas 78224	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead	Description (If travel outside of Texas, complete Schedule T) Ink for copier
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

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 I: 1 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7/14/2012	5 Payee name San Antonio Fresh Ink Under 21 Youth Poetry
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1346 Brighton, San Antonio, Texas
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other- Donation for travel	(b) Description (See instructions regarding type of information required.) Support for youth to attend competition in San Francisco, Calif.
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Date 8/23/2012	Payee name Walgreen's
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Amount (\$) \$202.02	Payee address; City; State; Zip Code 121 N. Zarzamora, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gifts	Description (See instructions regarding type of information required.) Candy for school staffs for start of school year
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Date 8/24/2012	Payee name SAM's Club
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Amount (\$) \$180.44	Payee address; City; State; Zip Code 3150 SW Military Dr., San Antonio, Texas 78224
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gifts	Description (See instructions regarding type of information required.) Pastries for school staffs for start of school year
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Date 8/26/2012	Payee name Target
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Amount (\$) \$188.04	Payee address; City; State; Zip Code 2810 SW Military Dr., San Antonio, Texas 78224
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Donation of supplies for schools	Description (See instructions regarding type of information required.) School supplies for students
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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 I: XXX 2 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8/26/2012	5 Payee name Dollar Tree	
6 Amount (\$) \$54.06	7 Payee address; City; State; Zip Code 2313 SW Military Dr., San Antonio, Texas 78224	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other-Donation of supplies for schools	(b) Description (See instructions regarding type of information required.) School supplies for students
Date 8/27/2012	Payee name La Chiquita Bakery	
Amount (\$) \$35.80	Payee address; City; State; Zip Code 1227 El Paso Street, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other-Donation of Pan	Description (See instructions regarding type of information required.) Pan dulce for Lanier High staff
Date 8/29/2012	Payee name Target	
Amount (\$) \$172.78	Payee address; City; State; Zip Code 2810 SW Military Dr., San Antonio, Texas 78224	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other-Donation of backpacks	Description (See instructions regarding type of information required.) Backpacks for students for start of school
Date 8/30/2012	Payee name Lanier Athletic Booster Club	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 1514 W. Cesar Chavez, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (See instructions regarding type of information required.) Ad to support Lanier Athletic Booster Club

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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	Poling 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 I: XXX 3 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11/3/2012	5 Payee name SAISD Foundation	
6 Amount (\$) \$200.00	7 Payee address: City; State; Zip Code 141 La Vaca, San Antonio, Texas	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift- donation	(b) Description (See instructions regarding type of information required.) Support of Chile Bowl fundraiser for scholarships for Lanier High students
Date 12/9/2012	Payee name Target (reimbused to Patti & Rod Radle)	
Amount (\$) \$213.12	Payee address: City; State; Zip Code 4522 Fredericksburg Road, San Antonio, Texas 78201	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gifts - donation	Description (See instructions regarding type of information required.) Sports equipment for Rhodes MS and gifts for students from Alazan-Apache Housing Project
Date 12/13/2012	Payee name Estrada Academy	
Amount (\$) \$200.00	Payee address: City; State; Zip Code 1112 S. Zarzamora, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift- Donation	Description (See instructions regarding type of information required.) Funds to assist with food for student/parent banquet
Date 12/17/2012	Payee name HEB	
Amount (\$) \$64.98	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) Gift- donation	Description (See instructions regarding type of information required.) Food trays for central office staff appreciation

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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 I: XXX 4 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12/17/2012	5 Payee name Amol's
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6 Amount (\$) \$55.17	7 Payee address: City; State; Zip Code 710 S. Flores, San Antonio, Texas 78204
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gift	(b) Description (See instructions regarding type of information required.) Supplies for central office staff appreciation
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Date 12/18/2012	Payee name Walgreens
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Amount (\$) \$137.06	Payee address: City; State; Zip Code 121 N. Zarzamora, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gifts	Description (See instructions regarding type of information required.) Gifts for school principals
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Date 12/18/2012	Payee name NowCast
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Amount (\$) \$200.00	Payee address: City; State; Zip Code 600 Soledad, 6th Floor, San Antonio, Texas 78205
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description (See instructions regarding type of information required.) Donation for student training
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Date 12/19/2012	Payee name HEB
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Amount (\$) \$168.50	Payee address: City; State; Zip Code 108 N. Rosillo, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description (See instructions regarding type of information required.) Food donation for community Posada
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: XXXX 5 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12/23/2012	5 Payee name Opinion Strategies
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6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 320 El Paso Street, San Antonio, Texas 78207
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)
	Fees	"Robo dial" service to contact residents for SAISD District 5 meeting

Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)

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