

received
Jan. 14th 2014

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: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mary P	OFFICE USE ONLY Date Received 01-14-14P04:33 RC/D Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
	NICKNAME LAST SUFFIX Patti Radle		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1202 Tampico Street San Antonio Texas 78207		
<input type="checkbox"/> change of address			
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 checked="" 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 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 7 / 1 / 2013	THROUGH	Month Day Year 12 / 31 / 2013
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <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)
14 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 None		
	Address / PO Box; Apt. / Suite #; City; State; Zip Code		
<input type="checkbox"/> additional pages			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

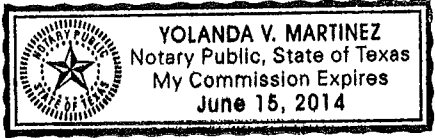
**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME Patti Radle	16 ACCOUNT # (Ethics Commission Filers)
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17 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>
	<hr/>	
	<hr/>	
	<hr/>	

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)	\$ -0-
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES Schedule F = \$597.58 Schedule I = \$2,631.89	\$ 3,307.87
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 7,390.33
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ -0-

19 AFFIDAVIT



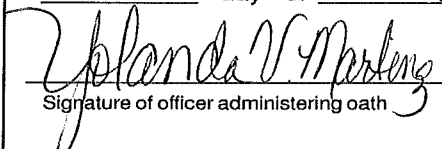
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Patti Radle, this the 7th day of January, 20 14, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Yolanda V. Martinez
 Printed name of officer administering oath

Notary
 Title 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: 1	
2 FILER NAME Patti Radle		3 ACCOUNT # (Ethics Commission Filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NONE THIS PERIOD	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(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
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 F: 1 of 1	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 7/29/2013	5 Payee name Ronnie Sanders	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 118 Summertime, San Antonio, Texas 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other - piano recording for leadership training	(b) Description (If travel outside of Texas, complete Schedule T) Piano recording required for leadership training.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/24/2013	Payee name Office Depot	
Amount (\$) \$467.58	Payee address; City; State; Zip Code 2321 SW Military Drive, 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 printing/copying machine
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/6/2013	Payee name Ronnie Sanders	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 118 Summertime, San Antonio, Texas 78216	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - piano recording for leadership training	Description (If travel outside of Texas, complete Schedule T) Piano recording required for leadership training.
Complete ONLY 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 ONLY 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: XXXX 1 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7/3/2013	5 Payee name HEB
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6 Amount (\$) \$114.60	7 Payee address; City; State; Zip Code 721 Castroville Road, San Antonio, Texas 78237
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food	(b) Description (See instructions regarding type of information required.) Refreshments for community issues meeting.
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Date 7/22/2013	Payee name Peace Initiatives
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 1443 S. St. Mary's Street, San Antonio, Texas 78210
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - Contribution	Description (See instructions regarding type of information required.) Contribution for work with family violence prevention.
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Date 7/29/2013	Payee name Agora Ministries
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 1807 San Fernando, San Antonio, Texas 78207
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - Contribution	Description (See instructions regarding type of information required.) Contribution for school supply project for students.
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Date August 2, 2013	Payee name Amanda Flores
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 4801 Gus Eckert, San Antonio, Texas 78240
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - contribution	Description (See instructions regarding type of information required.) Contribution for travel expenses for students in poetry contest.
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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: XXXX 2 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8/24/2013	5 Payee name SAM's	
6 Amount (\$) \$158.40	7 Payee address; City; State; Zip Code 3150 SW Military Drive, San Antonio, Texas 78224	
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.) Back to school food gifts for Lanier Cluster staff
Date 8/25/2013	Payee name Walgreen's	
Amount (\$) \$43.27	Payee address; City; State; Zip Code 121 N. Zarzamora St., San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (See instructions regarding type of information required.) Back to school food gifts for Lanier Cluster staff
Date 8/27/2013	Payee name SA2020	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 112 East Pecan St., Suite 1100, San Antonio, Texas 78205	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description (See instructions regarding type of information required.) Contribution to community work of SA2020.
Date 10/4/2013	Payee name Sophmore Class of Lanier High School	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1514 W. Cesar E. Chavez Blvd., San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Award Gift	Description (See instructions regarding type of information required.) 2nd Place award winner of Spanish Cheer contest

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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)

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1 Total pages Schedule I: XXX 3 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10/4/2013	5 Payee name Juan Velasquez	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2019 Hidalgo Street, San Antonio, Texas 78207	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Award Gift	(b) Description (See instructions regarding type of information required.) 1st Place award winner of Spanish Cheer contest
Date 10/5/2013	Payee name San Anto Cultural Arts	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2120 El Paso St., San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description (See instructions regarding type of information required.) Contribution for art programs for students
Date 10/9/2013	Payee name R.J. Publications	
Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 56, Bulverde, Texas 78163	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - support of Football Programs for Lanier football season.	Description (See instructions regarding type of information required.) Support of Football Programs for Lanier football season.
Date 10/17/2013	Payee name Robert's Flower Shop	
Amount (\$) 10.00	Payee address; City; State; Zip Code 423 Castroville Road, San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (See instructions regarding type of information required.) Flowers to recognize Teacher Yana Luna teacher award.

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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: XXXX 4 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11/13/2013	5 Payee name Lanier Sophmore Class	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1514 W. Cesar E. Chavez Blvd., San Antonio, Texas 78207	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution	(b) Description (See instructions regarding type of information required.) Contribution to Sophmore Class fundraiser.
Date 11/15/2013	Payee name SAISD Foundation	
Amount (\$) \$240.00	Payee address; City; State; Zip Code 141 LaVaca, San Antonio, Texas 78212	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description (See instructions regarding type of information required.) Contribution for scholarships through the Chile Bowl Gala
Date 12/8/2013	Payee name HEB	
Amount (\$) \$118.53	Payee address; City; State; Zip Code 6818 S. Zarzamora, San Antonio, Texas 78224	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (See instructions regarding type of information required.) Thank you cookies for Lanier Cluster staffs
Date 12/10/2013	Payee name HEB	
Amount (\$) \$37.11	Payee address; City; State; Zip Code 108 N. Rosillo St., San Antonio, Texas 78207	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (See instructions regarding type of information required.) Thank you cookies for Lanier Cluster staffs

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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: XXXX 5 of 5	2 FILER NAME Patti Radle	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12/19/2013	5 Payee name Target
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6 Amount (\$) \$259.98	7 Payee address; City; State; Zip Code 2810 SW Military Drive, San Antonio, Texas 78224
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution	(b) Description (See instructions regarding type of information required.) Toy contribution for "Alazan Apache Courts Christmas Event" for area students living in public housing.
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Date 12/27/2013	Payee name N & S Enterprises
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 330 Culebra Road, San Antonio 78201
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift	Description (See instructions regarding type of information required.) T-shirts for Lanier BB Team
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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.)
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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.)
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