Image# 202010029285003118				10/02/2020 18.02
FEC FORM 1	STATEMEN ORGANIZ			PAGE 1 / 7 —
			Offi	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Tony Gonzales f				
	14439 NW Military Hwy			
ADDRESS (number and street)	Ste 108-488			
is changed)				
	San Antonio			
	CITY 🔺		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address	TonyGonzalesforCong	ress@gmail.com		
is changed)	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AI	TonyGonzalesforCongress.co	m 		
	D2 / Y Y Y Y 2020			
B. FEC IDENTIFICATION N		00706614		
I. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
		-		
ype or Print Name of Treasur	er Gonzales, Angel, , ,			
Signature of Treasurer Gor	zales, Angel, , ,	[Electronically Filed]	Date	02 / Y Y Y Y 2020
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATION	may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		(Revised 06/2012)

10/02/2020 18 : 02

F	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
Can	ndidate	e Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Name Cand	e of didate	Gonzales, Ernest, Anthony, , II	
	didate / Affiliati	on REP Office Sought: K House Senate President	State TX District 23
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Part	ty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.		
	3.	FEC ID number	
	4.		

I

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

## Tony Gonzales for Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

WAR VETERANS FL	JND					
Mailing Address	PO BOX 26141					
	ALEXANDRIA				VA 223	313
		CITY			STATE	ZIP CODE
Relationship: Connect	ed Organization	ed Committee	¥ Joint	: Fundraising	Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	entify by name, address (p	ohone number	optiona	al) and position	on of the person	in possession of committee

Gonzales	s, Angel, , ,
Full Name	
Mailing Address	11613 Huebner
	San Antonio         TX         78248           -         -         -         -
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number     210     867     1779

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Gonzales, Angel, , ,
Mailing Address	11613 Huebner
	San Antonio       TX       78248       -
	CITY STATE ZIP CODE
Title or Position	Telephone number     210     867     1779

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																	1							 	_
Mailing Address																									
														1											
			1															L				]-[			
						CI	ΓY								STA	ΤE				ZIF	Р С	OD	E		
Title or Position																									
										Tele	eph	one	e ni	umt	ber							] – [			

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Fros	t Bank		
Mailing Address	P.O. Box 1600		
	San Antonio		78296
	CITY	STATE	ZIP CODE
Name of Bank, Deposito	ry, etc.		
Eagl	e Bank		
Mailing Addross	201 K St NW		
Mailing Address			
	Washington		20006
	CITY	STATE	ZIP CODE

FFC	Form	1S	(Revised	02/2017)
	1 01111	10	(11041300	02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising Participant:
5(g) or (h).	Joint Fundraising Participant:

1	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TONY GONZALES VICTORY FUND

Mailing Address	12000 STARCREST DR		
	STE 101		
		TX 78247	
Relationship:		STATE A ZIP	CODE
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	ership PAC Sponsor

## 8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																											
Mailing Address																											
	L																										
	L																			L					- [		
TITLE OR POSITION	V					(	CIT	Y								S	TAT	Έź				ZIF	Р С	OD	E		
												Te	elep	hor	ne	Nui	nbe	ər	L		 - L				-L		

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, BROAD											1							
Mailing Address	PO BOX 17001																	
									ГХ 		78	217				- [_		
		CITY					S	TAT	E 🔺				ΖI	РC	OD	E 4		

FFC	Form	<b>1</b> S	(Revised	02/2017)
1 20	1 01111	10	(11001300	02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(q) or(b)	Joint	Fundraising	Participant:
5(g) or (h).	Joint	Fundraising	Participant:

1. [	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	C
4.	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TAKE BACK THE HOUSE TEXAS 2020

1		
Mailing Address	PO BOX 30844	
		MD 20824
Relationship:	CITY A	STATE ▲ ZIP CODE ▲
Connected	Organization X Affiliated Committee	Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																										
Mailing Address	L			1																						
	L																									
	L																		L					- [		
TITLE OR POSITION	▼					C	ידו	Y A							S	TAT	Έ				ZIP	C	DC	E		
											Te	lep	hor	ne	Nui	nbe	ər	L		 - L				- [		

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, PROSE			
Mailing Address	9115 WEST SAM HOUSTON PKWY		
			77064
	CITY A	STATE A	ZIP CODE

FEC	Form	1S	(Revised	02/2017)
			(11001000	02/2011/

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
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1. [	FEC ID number
2.	FEC ID number
3.	FEC ID number
4	FEC ID number C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TEXAS RELOADED

Mailing Address	5900 MEMORIAL DR STE 215	
		TX 77007
Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
Connected (	Organization	Joint Fundraising Representative

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name			
Mailing Address			
TITLE OR POSITION		STATE A	ZIP CODE
	тт	elephone Number	

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.																																
Mailing Address	L																															
	L																															
	L																												. [			
		CITY 🔺													STATE A							ZIP CODE										