




Official Public Records of  
Harris County  
Stan Stanart  
County Clerk

Campaign Finance Report

UNOFFICIAL COPY

|                    |                                |
|--------------------|--------------------------------|
| FileNo:            | 2017283                        |
| Received By Clerk: | 7/18/2017                      |
| File Date:         | July 17, 2017                  |
| Office:            | County Criminal Court 4        |
| Candidate:         | Baldwin, Shannon               |
| Treasurer:         | Not Available                  |
| Category:          | Contributions And Expenditures |
| Delivered By:      | Electronically Filed           |
| Type:              | COR                            |

 *Stan Stanart*  
COUNTY CLERK  
HARRIS COUNTY, TEXAS

Harris County No Fee

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

2017283

Page - 2

|  |  |   |   |  |
|--|--|---|---|--|
| The JC/OH Instruction Guide explains how to complete this form.                          |  | 1 Filer ID  | 2 Total pages filed:<br>8   |  |
| 3 CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR  | FIRST<br>Shannon                                  | MI  |  |
|  | NICKNAME   | LAST<br>Baldwin                                   | SUFFIX  |  |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>15927 Maple Shores Dr<br>Houston, TX 77044 |   | ZIP CODE  |  |
|  | Date Hand-delivered or Date Postmarked   |   | Receipt #      Amount   |  |
|  | Date Processed   |   | Date Imaged   |  |
|  | Date Imaged  |   | Date Imaged   |  |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR  | FIRST   | MI  |  |
|  | NICKNAME   | LAST  | SUFFIX  |  |
| 6 CAMPAIGN TREASURER ADDRESS<br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE);   |   | APT / SUITE #;  | CITY; STATE; ZIP CODE  |
| 7 CAMPAIGN TREASURER PHONE   | AREA CODE  | PHONE NUMBER                                      | EXTENSION   |  |
| 8 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)                                     |
| 9 PERIOD COVERED   | Month    Day    Year<br>01/01/2017   | THROUGH   | Month    Day    Year<br>06/30/2017                                    |  |
| 10 ELECTION  | ELECTION DATE<br>Month    Day    Year<br>11/06/2018                                  |   | ELECTION TYPE   |  |
|  |  |   | <input type="checkbox"/> Primary                                      | <input type="checkbox"/> Runoff <input type="checkbox"/> Other                             |
|  |  |   | <input checked="" type="checkbox"/> General                           | <input type="checkbox"/> Special   |
| 11 OFFICE  | OFFICE HELD (if any)   |   | 12 OFFICE SOUGHT (if known)<br>County Criminal Court at Law Place 4th |  |
| <b>GO TO PAGE 2</b>  |  |   |   |  |

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM JC/OH  
COVER SHEET PG 2**  
2 of 8

|  |                    |
|--|--------------------|
| <b>13 C / OH NAME</b> Baldwin, Shannon | <b>14 Filer ID</b> |
|--|--------------------|

|   |  |                       |                                  |  |                                   |  |                          |  |
|---|--|-----------------------|----------------------------------|--|-----------------------------------|--|--------------------------|--|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |                       |                                  |  |                                   |  |                          |  |
| <table style="width:100%"> <tr> <td style="width:30%"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td></td> </tr> </table> | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b> | <input type="checkbox"/> GENERAL |  | <input type="checkbox"/> SPECIFIC |  | <b>COMMITTEE ADDRESS</b> |  |
|   | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b> |                                  |  |                                   |  |                          |  |
|   | <input type="checkbox"/> GENERAL   |                       |                                  |  |                                   |  |                          |  |
|   | <input type="checkbox"/> SPECIFIC  |                       |                                  |  |                                   |  |                          |  |
| <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  |  |                       |                                  |  |                                   |  |                          |  |
| <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>   |  |                       |                                  |  |                                   |  |                          |  |

|                                |   |             |
|--------------------------------|---|-------------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 0.00     |
|                                | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$ 1,100.00 |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$ 0.00     |
|                                | 4. TOTAL POLITICAL EXPENDITURES   | \$ 650.00   |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD                                | \$ 1,014.13 |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ 0.00     |

**17 AFFADAVIT**

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 \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

2017283

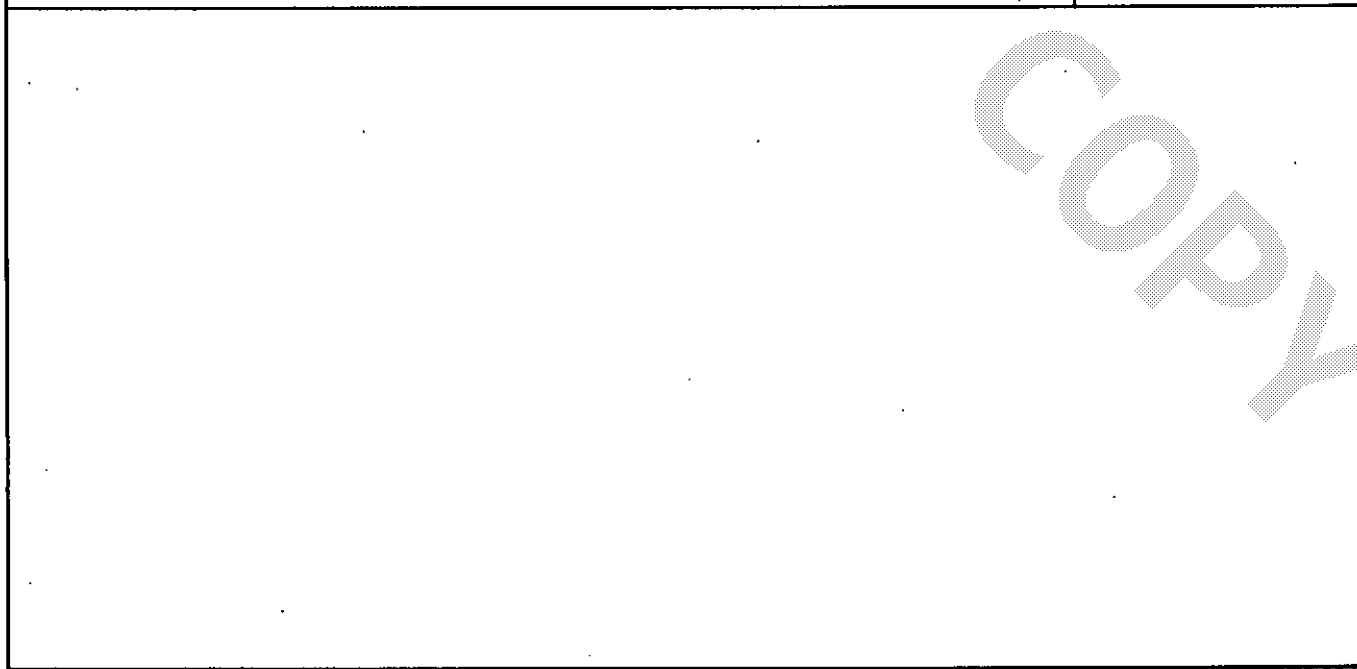
Page - 3

**SUBTOTALS - JC/OH**

**FORM JC/OH**  
**COVER SHEET PG 3**  
 3 of 8

|  |                    |
|--|--------------------|
| <b>18 FILER NAME</b><br>Baldwin, Shannon | <b>19 Filer ID</b> |
|--|--------------------|

|     | 20 SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE   | SUBTOTAL AMOUNT |
|-----|---|-----------------|
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)             | \$ 1,100.00     |
| 2.  | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$              |
| 3.  | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                                    | \$              |
| 4.  | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)  | \$              |
| 5.  | <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$              |
| 6.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$              |
| 7.  | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$              |
| 8.  | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$              |
| 9.  | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                  | \$ 650.00       |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$              |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$              |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$              |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

2017283

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>   |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 1/4 Rpt: 4/8 |
| <b>2</b> FILER NAME<br>Baldwin, Shannon  |   | <b>3</b> Filer ID   |
| <b>4</b> Date<br>06/01/2017  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Adigun, Teresa  | <b>7</b> Amount of Contribution (\$)<br>\$50.00           |
| <b>6</b> Contributor address; City; State; Zip Code<br>6418 Hillman Glen Circle<br><br>Houston, TX 77086 |   |   |
| <b>8</b> Contributor's Principal Occupation<br>Nurse   |   | <b>9</b> Contributor's Job Title<br>Nurse                 |
| <b>10</b> Contributor's employer/law firm<br>UT MD Anderson  |   | <b>11</b> Law firm of contributor's spouse (if any)       |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any)                                      |   |   |
| <b>Date</b><br>06/05/2017  | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Askew, Valeria    | <b>Amount of Contribution (\$)</b><br>\$50.00             |
| <b>Contributor address; City; State; Zip Code</b><br>5439 Brian Haven Dr<br><br>Houston, TX 77091        |   |   |
| <b>Contributor's Principal Occupation</b>  |   | <b>Contributor's Job Title</b>                            |
| <b>Contributor's employer/law firm</b>   |   | <b>Law firm of contributor's spouse (if any)</b>          |
| <b>If contributor is a child, law firm of parent(s) (if any)</b>   |   |   |
| <b>Date</b><br>06/02/2017  | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Barefield, Andrea | <b>Amount of Contribution (\$)</b><br>\$50.00             |
| <b>Contributor address; City; State; Zip Code</b><br>2124 N Main St<br><br>Houston, TX 77009             |   |   |
| <b>Contributor's Principal Occupation</b><br>Insurance Agent   |   | <b>Contributor's Job Title</b><br>Agent                   |
| <b>Contributor's employer/law firm</b>   |   | <b>Law firm of contributor's spouse (if any)</b>          |
| <b>If contributor is a child, law firm of parent(s) (if any)</b>   |   |   |

Page - 5

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A(J)1**

2017283

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>      |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 2/4 Rpt: 5/8  |
| <b>2</b> FILER NAME<br>Baldwin, Shannon                               |   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>06/02/2017   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dardy, Bobbt<br><b>6</b> Contributor address; City; State; Zip Code<br>7907 Dear Meadow Dr<br><br>Houston, TX 77071 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Contributor's Principal Occupation<br>Clinical Research Asst |   | <b>9</b> Contributor's Job Title<br>Clinical Research Asst |
| <b>10</b> Contributor's employer/law firm                             |   | <b>11</b> Law firm of contributor's spouse (if any)        |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any)   |   |  |
| Date<br>06/05/2017  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fenceroy, Celia<br><b>6</b> Contributor address; City; State; Zip Code<br>2429 Bissonnet<br>9<br>Houston, TX 77005           | Amount of Contribution (\$)<br><br>\$250.00                |
| Contributor's Principal Occupation<br>Healthcare professional         |   | Contributor's Job Title<br>Healthcare professional         |
| Contributor's employer/law firm                                       |   | Law firm of contributor's spouse (if any)                  |
| If contributor is a child, law firm of parent(s) (if any)             |   |  |
| Date<br>06/05/2017  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Flagg, Shaketha<br><b>6</b> Contributor address; City; State; Zip Code<br>14426 Burleson Bend Dr<br><br>Houston, TX 77049    | Amount of Contribution (\$)<br><br>\$50.00                 |
| Contributor's Principal Occupation<br>Salon owner                     |   | Contributor's Job Title<br>Salon owner                     |
| Contributor's employer/law firm                                       |   | Law firm of contributor's spouse (if any)                  |
| If contributor is a child, law firm of parent(s) (if any)             |   |  |

Page - 6

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A(J)1**

2017283

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 3/4 Rpt: 6/8 |
| <b>2</b> FILER NAME<br>Baldwin, Shannon                             |  | <b>3</b> Filer ID   |
| <b>4</b> Date<br>06/02/2017   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hawkins, Kandice | <b>7</b> Amount of Contribution (\$) \$100.00             |
|   | <b>6</b> Contributor address; City; State; Zip Code<br>10000 Broadway St<br><br>Pearland, TX 77584           |   |
| <b>8</b> Contributor's Principal Occupation<br>Nuclear medicine     |  | <b>9</b> Contributor's Job Title<br>unk                   |
| <b>10</b> Contributor's employer/law firm                           |  | <b>11</b> Law firm of contributor's spouse (if any)       |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |   |
| <b>Date</b><br>06/02/2017   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jefferson, Paul    | <b>Amount of Contribution (\$)</b><br>\$100.00            |
|   | <b>Contributor address; City; State; Zip Code</b><br>13033 Landmark St<br><br>Houston, TX 77245              |   |
| <b>Contributor's Principal Occupation</b><br>Church Admin           |  | <b>Contributor's Job Title</b><br>Church Admin            |
| <b>Contributor's employer/law firm</b>                              |  | <b>Law firm of contributor's spouse (if any)</b>          |
| <b>If contributor is a child, law firm of parent(s) (if any)</b>    |  |   |
| <b>Date</b><br>06/05/2017   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Johnson, D'ondreia | <b>Amount of Contribution (\$)</b><br>\$100.00            |
|   | <b>Contributor address; City; State; Zip Code</b><br>6307 Tuskegee<br><br>Houston, TX 77091                  |   |
| <b>Contributor's Principal Occupation</b><br>Accountant             |  | <b>Contributor's Job Title</b><br>Accountant              |
| <b>Contributor's employer/law firm</b>                              |  | <b>Law firm of contributor's spouse (if any)</b>          |
| <b>If contributor is a child, law firm of parent(s) (if any)</b>    |  |   |

Page - 7

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

2017283

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 4/4 Rpt: 7/8 |
| <b>2</b> FILER NAME<br>Baldwin, Shannon                             |  | <b>3</b> Filer ID   |
| <b>4</b> Date<br>06/02/2017   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Martinez, Cristina<br><b>6</b> Contributor address; City; State; Zip Code<br>3509 Wheatmeadow Lane<br><br>Pearland, TX 77581 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00      |
| <b>8</b> Contributor's Principal Occupation<br>Entrepreneur         |  | <b>9</b> Contributor's Job Title<br>Business owner        |
| <b>10</b> Contributor's employer/law firm                           |  | <b>11</b> Law firm of contributor's spouse (if any)       |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |   |
| Date<br>06/04/2017  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Williams, Felix<br><b>6</b> Contributor address; City; State; Zip Code<br>2406 Bivens Brook Dr.<br><br>Houston, TX 77067              | Amount of Contribution (\$)<br><br>\$50.00                |
| Contributor's Principal Occupation<br>System Admin                  |  | Contributor's Job Title<br>System Admin                   |
| Contributor's employer/law firm                                     |  | Law firm of contributor's spouse (if any)                 |
| If contributor is a child, law firm of parent(s) (if any)           |  |   |

Page - 8



**POLITICAL EXPENDITURES FROM PERSONAL FUNDS**

**SCHEDULE G**

2017283

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 1/1 Rpt: 8/8  | <b>2</b> FILER NAME<br>Baldwin, Shannon   | <b>3</b> Filer ID  |
| <b>4</b> Date<br>05/16/2017  | <b>5</b> Payee name<br>Harris County Democratic Party   |  |
| <b>6</b> Amount (\$)<br>\$100.00<br><br><input type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>1445 N Loop West<br><br>Houston, TX 77008  |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought      Office held   |

|   |  |  |
|---|--|--|
| Date<br>06/18/2017  | Payee name<br>Houston GLBT Caucus  |  |
| Amount (\$)<br>\$550.00<br><br><input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code<br>401 Branard<br><br>Houston, TX 77006         |  |
| <b>PURPOSE OF EXPENDITURE</b>   | <b>Category</b> (See Categories listed at the top of this schedule)<br>Event Expense | <b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought      Office held   |

**RECORDER'S MEMORANDUM:**  
At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.

Page - 9