



Official Public Records of
Harris County
Stan Stanart
County Clerk

Campaign Finance Report



Stan Stanart
COUNTY CLERK
HARRIS COUNTY, TEXAS

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

Harris County No Fee

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

2017283

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 8	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Shannon	MI	OFFICE USE ONLY Date Received	
	NICKNAME	LAST Baldwin	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 15927 Maple Shores Dr Houston, TX 77044			ZIP CODE	
	Date Hand-delivered or Date Postmarked			Receipt # Amount	
	Date Processed			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Date Received	
	NICKNAME	LAST	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (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	THROUGH	Month Day Year
			01/01/2017		06/30/2017
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<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) County Criminal Court at Law Place 4th	
GO TO PAGE 2					

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Baldwin, Shannon

14 Filer ID

15 NOTICE
FROM
POLITICAL
COMMITTEE(S)

☐ 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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION
TOTALS

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

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 650.00

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 1,014.13

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 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 _____, 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

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3
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18 FILER NAME Baldwin, Shannon		19 Filer ID
20 SCHEDULE SUBTOTALS 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

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

2017283

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

2017283

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

2017283

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:
Sch: 4/4 Rpt: 7/8

2 FILER NAME

Baldwin, Shannon

3 Filer ID

4 Date

06/02/2017

5 Full name of contributor

Martinez, Cristina

☐ out-of-state PAC (ID#: _____)

7 Amount of Contribution (\$)

\$200.00

6 Contributor address; City; State; Zip Code

3509 Wheatmeadow Lane

Pearland, TX 77581

8 Contributor's Principal Occupation

Entrepreneur

9 Contributor's Job Title

Business owner

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

06/04/2017

Full name of contributor

Williams, Felix

☐ out-of-state PAC (ID#: _____)

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

2406 Bivens Brook Dr.

Houston, TX 77067

Contributor's Principal Occupation

System Admin

Contributor's Job Title

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)

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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 8/8	2 FILER NAME Baldwin, Shannon	3 Filer ID
4 Date 05/16/2017	5 Payee name Harris County Democratic Party	
6 Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1445 N Loop West Houston, TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2017	Payee name Houston GLBT Caucus	
Amount (\$) \$550.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 401 Branard Houston, TX 77006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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.