



Official Public Records of
Harris County
Stan Stanart
County Clerk

Campaign Finance Report

FileNo:	2017203
Received By Clerk:	7/13/2017
File Date:	July 13, 2017
Office:	Justice Of The Peace Pct. 2, Place 2
Candidate:	Risner, George
Treasurer:	Risner, Brady J.
Category:	Contributions And Expenditures
Delivered By:	Personal Appearance
Type:	COR



Stan Stanart

COUNTY CLERK
HARRIS COUNTY, TEXAS

Harris County No Fee

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

2017203

14 JC/OH NAME Judge George E. Risner 15 Filer ID (Ethics Commission Filers)

16 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.

GENERAL
 SPECIFIC

COMMITTEE TYPE: GENERAL
COMMITTEE NAME: Committee to Re Elect George E. Risner
COMMITTEE ADDRESS: P.O. Box 6528 Amandla TX 77506
COMMITTEE CAMPAIGN TREASURER NAME: BRADLY T. RISNER
COMMITTEE CAMPAIGN TREASURER ADDRESS: P.O. Box 6528 Amandla TX 77506

Additional Pages

17 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)	\$ 2550. ⁰⁰
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 202.96
	4. TOTAL POLITICAL EXPENDITURES	\$ 7202.96
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 81,053. ⁶⁷
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -

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18 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.

George E. Risner
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said George E. Risner this the 13th day of July, 2017, to certify which, witness my hand and seal of office.

Lyther Walker Lyther WALKER Clinic Coordinator
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

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 2550.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$ 0
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 0
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 720296
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: 1 of 3		2 FILER NAME Judge George E. Alvar		3 Filer ID (Ethics Commission Filers)	
4 Date 4-27-17		5 Payee name Mackie Caves			
6 Amount (\$) 1200.00		7 Payee address; City; State; Zip Code 11814 Paige Place D, Houston TX 77089			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Action Items & Fund Raiser		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 1-26-17		Payee name MARINA TRUJILLO			
Amount (\$) 800.00		Payee address; City; State; Zip Code 14 Rosecastle Dr. Spring, TX 77379			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 2/14/17		Payee name WALMART			
Amount (\$) 32.96		Payee address; City; State; Zip Code 1107 Shaver St Pasadena, TX 77506			
PURPOSE OF EXPENDITURE Gifts		Category (See Categories listed at the top of this schedule) Floral for VA Wedding		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2, 013	2 FILER NAME Judge George E. Ashker	3 Filer ID (Ethics Commission Filers)
4 Date 11/9/17	5 Payee name South Belt Ellington Levee	
6 Amount (\$) 35.00	7 Payee address; City; State; Zip Code 11555 Bernier Houston, TX 77089	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Exp. donation	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date	Candidate / Officeholder name	
Payee name	Office sought	
Office held	Office held	
Date	Candidate / Officeholder name	
Payee name	Office sought	
Office held	Office held	
Amount (\$)	Candidate / Officeholder name	
Payee address; City; State; Zip Code	Office sought	
Office held	Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date	Candidate / Officeholder name	
Payee name	Office sought	
Office held	Office held	
Amount (\$)	Candidate / Officeholder name	
Payee address; City; State; Zip Code	Office sought	
Office held	Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date	Candidate / Officeholder name	
Payee name	Office sought	
Office held	Office held	
Amount (\$)	Candidate / Officeholder name	
Payee address; City; State; Zip Code	Office sought	
Office held	Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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.

1 Total pages Schedule F1: 3 of 3	2 FILER NAME Judge George E. Linder	3 Filer ID (Ethics Commission Filers)
4 Date 6/1/17	5 Payee name South Belt Ellington Lender	
6 Amount (\$) 35.00	7 Payee address; City; State; Zip Code 11555 beamer Houston TX 77089	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Exp.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH: Candidate / Officeholder name Office sought Office held	
Date 5/19/17	Payee name The Regina Renee Martinez Memorial Foundation	
Amount (\$) 100.00	Payee address; City; State; Zip Code P.O. Box 238 Salerno Oaks TX 72547	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) donation to memorial	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH: Candidate / Officeholder name Office sought Office held	
Date 4/27/17	Payee name Mack's Caves	
Amount (\$) 5000.00	Payee address; City; State; Zip Code 11811 East Fwy suite 600 Houston TX 77029	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Action Memorials items fund	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 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

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

2017203

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 1 of 3
2 FILER NAME Judge George E. Risner		3 Filer ID (Ethics Commission Filers)
4 Date 2/14/17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Angie Bogdanos	7 Amount of contribution (\$) 100.00
6 Contributor address; City: State: Zip Code 511 College Ave South Houston 77587		

8 Contributor's principal occupation City Cate South Houston	9 Contributor's job title owner
10 Contributor's employer/law firm NO	11 Law firm of contributor's spouse (if any) NO
12 If contributor is a child, law firm of parent(s) (if any) N/A	

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City: State: Zip Code	Amount of contribution (\$)
	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	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City: State: Zip Code	Amount of contribution (\$)
	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)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

2017203

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 2 of 3
2 FILER NAME Judge George E. Risner		3 Filer ID (Ethics Commission Filers)
4 Date May 31 / 17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Pipe Filter's Local 211-COPE Account	7 Amount of contribution (\$) \$ 2000.00
6 Contributor address; City; State; Zip Code 1301 West 13th Street West PAAY TX 77536		9 Contributor's job title President of Union
8 Contributor's principal occupation Pipe Filter Local Union		11 Law firm of contributor's spouse (if any) N/A
10 Contributor's employer/law firm Pipe Filter's Local Union 211		12 If contributor is a child, law firm of parent(s) (if any) N/A

Date 4/19/17	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC ID#: Pepper (Cate) Bogdano	Amount of contribution (\$) 72587100.00
Contributor address; City; State; Zip Code 571 College Ave South Houston TX 77587		9 Contributor's job title Father of owner
Contributor's principal occupation Rest. Business		11 Law firm of contributor's spouse (if any) N/A
Contributor's employer/law firm 571 College Ave South Houston TX 77587		12 If contributor is a child, law firm of parent(s) (if any) N/A

Date 3/15/17	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: GARY L. BOLTON	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 228 Sutherland Ln League City TX 77573-6291		9 Contributor's job title Identity Manager
Contributor's principal occupation Property Management		11 Law firm of contributor's spouse (if any) N/A
Contributor's employer/law firm N/A		12 If contributor is a child, law firm of parent(s) (if any) N/A

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

2017203

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>3 of 3</i>
2 FILER NAME <i>Judge George E. Rosen</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/5/17</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>HARRY BOGDANAS</i>	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code <i>511 College Ave South Houston TX 77587</i>		
8 Contributor's principal occupation <i>Ret. Business</i>		9 Contributor's job title <i>owned City Gate Houston</i>
10 Contributor's employer/law firm <i>N/A</i>		11 Law firm of contributor's spouse (if any) <i>N/A</i>
12 If contributor is a child, law firm of parent(s) (if any) <i>N/A</i>		

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
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)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
.. Complete only if "Report Type" on page 1 is marked "Final Report" ..

1 C/OH NAME

2 Filer ID (Ethics Commission Filers)

Judge George E. Risser

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

.. Complete A & B below only if you are not an officeholder. ..

A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

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.

Signature of Candidate

5 OFFICEHOLDER

.. Complete this section only if you are an officeholder ..

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder

George E. Risser