

Official Public Records of Harris County Stan Stanart County Clerk

Campaign Finance Report



Stan Stanart

COUNTY CLERK HARRIS COUNTY, TEXAS

FileNo:

2018470

Received By Clerk:

7/16/2018

File Date:

July 16, 2018

Office:

County School Trustee, Position 3, At Large

Candidate:

Cantu, Richard

Treasurer:

Wiley, Joyce

Category:

Contributions And Expenditures

Delivered By:

Personal Appearance

Type:

COR

Harris County No Fee

	TE / OFFICEHOLD			FOR COVER SHE	M C/OH ET PG 1
The C/OH Instruction G	uide explains how to complete this f	1	ID (Ethics Commission Filors)	2 Total pages filed	9
CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST RICH NICKNAME LAST	ARD	MI SUFFIX	OFFICE U	SE ONLY
CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #;	+MORK	STATE: ZIP CODE HON. TX 77076		
CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (346) 444 - C	0624	EXTENSION	Date Hand-dollvered er	Date Postmarked
G CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MS. JO NICKNAME LAST	ICE VILEY	MI	Date Processed Date Imaged	Amount \$
CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #:	CITY: STATE: H, HOM	zip code	17018
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (7)3) 598 -	237:	extension L		
REPORT TYPE		y before election	Runoff Exceeded \$500 limit	15th day after treasurer apport (Officeholder C	intment
O PERIOD COVERED	Month Day Year 5 / 13 / 2	_	Month	20 Year	W2 .

12 OFFICE	OFFICE HELD (If any)
	d1v

ELECTION DATE

11 ELECTION

13 OFFICE SOUGHT (It know

Runott

Special

ELECTION TYPE

Other Description

COUNTY SCHOOL
TRUNSTEE, POS.

GO TO PAGE 2

Primary

General

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

			· · · · · · · · · · · · · · · · · · ·	
14 C/OH NAME RICHARD CANTU 15 Filer ID (Ethics Commission Filers)				
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES INDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT WISENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFOURES.	THE CANDIDATE'S OR OFFICEHOLDER'S	
	COMMITTEE TYPE	COMMITTEE NAME COMMITTEE ADDRESS		
	SPECIFIC			
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	1. TOTAL I	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 963.00	
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, B ITEMIZED	\$	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 1606.07 \$ 656.58	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ORTING PERIOD	\$ 65658	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	
18 AFFIDAVIT		i swear, or affirm, under penalty of perjury true and correct and includes all informati		
VERONICA SANCHES Commission # 130377224 My Commission Expires September 21, 2019				
AFFIX NOTARY STAMP/SEALABOVE				
Sworn to and subsci		to certify which, witness my hand and seal of office.	, this the	
Vormusa S	ent.	Veronica Sanches	Votary of TX	
Signature of officer a	dministering oath	Printed name of officer administering oath	itle of officer administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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19 F	THEITARD CANTH	20 Filer ID (Ethics Co	nmission Filers)
	CHEDULE SUBTOTALS IAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 953.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE E: LOANS		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$ 1606.07
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$
11.	SCHEDULE 1: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTED TO FILER	TIONS	\$

WONE	SCHEDULE A1		
The	Instruction Guide explains how to complete this form.		
2 FILER NAME	RICHARD CANTU 3 Filer ID (Ethics Commission Filers)		
5/14/18	5 Full name of contributor out-of-state PAC (ID#: 7 Amount of contribution (\$) CARDLINA JIMENEZ 6 Contributor address; City; State; Zip Code 1254 NOMAH ST. HOM. TX 77064		
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)		
5/28/18	Full name of contributor oul-of-state PAC (ID#:) Amount of contribution (\$) AAPON AZIOS Contributor address; City: State; Zip Code 6227 WYWWWODD HOW X 7708		
Principal occup	Dation / Job title (See Instructions) Employer (See Instructions)		
6/18/18	Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) AULE LEE Contributor address; City; State; Zip Code 4922 VALVETTH HOVETX 77096		
I	PATIVEY Employer (See Instructions) HAWES HILL & ASSOC		
6/26/18	Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) TUDY HOYA Contributor address; City; State; Zip Code 1206 SUNNY DN. HON. TX 77037		
Principal occup	pation / Job title (See Instructions) Employer (See Instructions) ALDINE 15D		
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	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME 721 CHARD CANTU	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAC (ID8:	1
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instru	ctions)
Date Full name of contributor Out-of-state PAC (ID):	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Employer (See Instru SOUD I	T NETWORKS
Date Full name of contributor CAVLOS DEHOLOS Contributor address; City; State; Zip Code 144 Doveches DE HOU. TX 702: Principal occupation / Job title (See Instructions) Employer (See Instru	Amount of contribution (\$)
Date Full name of contributor out-of-state PAC (IDS:	Amount of contribution (\$) \$\frac{1}{25}.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)	COPP. INTL.
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS I	

MONET	ARY POLITICAL CONTRI	BUTIONS	SCHEDULE A1
The	instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	RICHARD CANTU		3 Filer ID (Ethics Commission Filers)
6/30/8	5 Full name of contributor out-of-state PAC SM17 6 Contributor address; City; State; 13415 YAVPON HOWY	HOM. TX HOM. 7X	7 Amount of contribution (\$) \$\frac{4}{20}.00
8 Principal occu	DOCK 2AM DIRECTOR	9 Employer (See Instruc	E ISD
Date 6	Full name of contributor out-of-state PAC TOBONDAH TOSTE Contributor address; City; State Contributor Out-of-state PAC Contributor Out-of	2	Amount of contribution (\$) \$ 20.00
Principal occup	ation Job title (See Instructions)	Employer (See Instruc	tions)
7/4/18	Full name of contributor Deliver state PAC JAQVEUNE JOSEP Contributor address; City; State; 12303 WESTVILLAGE	+ HOWARD	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	lions)
Date	Full name of contributor out-of-state_PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City; State	; Zip Code	1
Principal occup	nation / Job title (See Instructions)	Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIES O If contributor is out-of-state PAC, please see instr		

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 Com Credit Card Payment	Event Expense Fees Food/Beverage Expense Gilt/Awards/Memortals Expense mittee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing 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)
Crown Card Payment	The Instruction Guide explain	ns how to complete this form.	
1 Total pages Schedule F1: 2 F	FILER NAME RICHARD	CANTÚ	3 Filer ID (Ethics Commission Filers)
⁴ Date 5-13-18 ⁵ P	Payee name A to Z SY	BUALTIE	
6 Amount (\$) 7 P	2111 HAPZTWK	IL HOY; IX	. 77093
1	Category (See Categories listed at the top of this s	Check if travel ou	uside of Taxas. Complete Schedule T. 1, TX, officeholder living expense
	EXYENS	B MAYSE	17
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date / 1 P	ayee name		
5/12/18	GLOWIA TA	rumbe	
Amount (\$) P	THIS PAY	KIP Code KEL ZD. 1	1047X.77016
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this a	Check if travel out	tside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY If direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	:		
Date F	Payee name		
5/18/18	GLOWLA P	'ALMER	
Amount (\$)	'ayee address; City; State; Z		•
\$800,00	7413 PAVLLER	2 RD. Hal.	X 77016
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this a	Check if travel ou	tside of Texas. Camplete Schedule T. TX, afficeholder living expense VOTE OUTCEACH
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITOREON	redonies i on box o(u)	
Advertising Expense Accounting/Banking	Event Expense Fees	Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Office Overhead/Rental Expense Transportation Equipment & Related Exp	pense
Consulting Expense Contributions/Donations Made E	Food/Beverage Expense Gilt/Awards/Memorials Expense	Polling Expense Travel In District Printing Expense Travel Out Of District	
Candidate/Officeholder/Politic		Salaries/Wages/Contract Labor Other (enter a category not listed above))
Credit Card Payment	· · · · · · · · · · · · · · · · · · ·	tains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME RICHARD	> CANTU 3 Filer ID (Ethics Commission File	ers)
4 Date 5/17/18	DON EVLAT	LI TUSTAURANT	
6 Amount (\$)	7 Payee address; City; State;	Zip Code	
\$48.80	300 GULFEAT	E HOM. 7X. 77087	
8	(a) Category (See Categories listed at the top of the	his schedula) (b) Description	
PURPOSE	Too 100 100	Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE	1 1000/1300 CAGE	Check If Austin, TX, officeholder living expense	J
LAPENDITORE	EXPENS	E CAMPAIGN MEETII	4
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held	
Date ;	Payee name		
5/14/18	37AY2 570	P #53	
Amount (\$)	Payee address; City; State;	Zlp Code	
\$59.53	202 N. 2008	WEST HOU. TX. 770/8	
	Category (See Categories ilsted at the top of the	his schedule) Description	
PURPOSE OF	FOOD/2010/14	Check if Austin, TX, officeholder Ilving expense	
EXPENDITURE	260- MT	WALLY TOWN SNIALY	
	EXVAVSE	VICINIE OF OFFICE	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office saught Office held	
Date_ 1	Payee name		
5/14/18	FAMILY DO	HAR	
Amount (\$)	Payee address; City; State;	Zip Code	
4122.63	9605 IR	YNGTON HOU! IX 1707	76
	Category (See Categories listed at the top of the		
PURPOSE	15 May 17 MONIA	Check If travel outside of Toxas. Complete Schedule T.	
OF EXPENDITURE	EVEN 1/YUV	Check if Austin, TX, officeholder living expense	nJ
	EXPENSE	EADLY VOTING, SOL	少日
Complete ONLY If direct	Candidate / Officeholder name	Office sought Office held	7
expenditure to benefit C/O		•	
	ATTACH ADDITIONAL COPI	ES OF THIS SCHEDULE AS NEEDED	<i>**</i>
<u> </u>	·	Deviled O	10 10 0 4 F

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 photocopy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was illed and recorded.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officoholder/Politics Credi Card Payment	Fees Of Food/Beverage Expense Po Glift/Awards/Memoriais Expense Pr	an Repayment/Reimbursement fice Overhead/Rental Expense filing Expense filting	
1 Total pages Schedule F1:	2 FILER NAME RICHAID	CANTU 3 Filer ID (Ethics Commission Filers)	
4 Dato 5/17/18	5 Payee name MCDONAL	D5	
6 Amount (\$) \$37,60	7 Payee address; City; State; Zip C	OB HOY. 7X. 77016	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school FOOD / REVENUE EXCEPTION (b) Category (See Categories listed at the top of this school FOOD / REVENUE EXCEPTION FOO	Check if travel outside of Texas. Complete Schedule T.	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held	
5/18/18	Payae name LOVES TIM	WEL CENTER D	
Amount (\$)	Payee address; City; State; Zip C		
\$50.17	3940 MCCART	1 HOU. TX. 770)3	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	Ula) Description Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense	
Complete ONLY If direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
5 22 15 g	Payee name SHIPLEYS D	ONUTS	
Amount (\$) \$19.55	Payee address; City; State; Zip C	twy 249 HOU. TX. 77066	
PURPOSE OF EXPENDITURE	POLITICS POLITICS PAGE PAGE	Check if travel outside of Taxas. Complete Schedule T. Check if Austin, TX, officeholder living expanse Check if Austin, TX, officeholder living expanse Check if Austin, TX, officeholder living expanse	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate / Officeholder name	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			