

Official Public Records of
Harris County
Stan Stanart
County Clerk

Campaign Finance Report

FileNo:	201782
Received By Clerk:	1/17/2017
File Date:	1/17/2017 4:00:43 PM
Office:	Justice Of The Peace Pct. 1, Place 1
Candidate:	Vara, Richard C.
Treasurer:	Not Available
Category:	Contributions And Expenditures
Delivered By:	Courier
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

201782

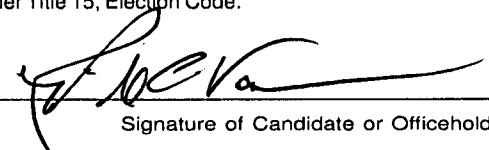
14 JC/OH NAME RICHARD C. VARA	15 Filer ID (Ethics Commission Filers)
----------------------------------	--

16 NOTICE FROM POLITICAL COMMITTEE(S) <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. 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.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

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)	\$ 1,635.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 178.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,523.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$9,787.84


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.

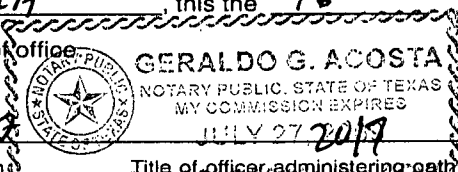

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Richard C. Vara, this the 16th day of January, 2017, to certify which, witness my hand and seal of office.

 Signature of officer administering oath

 Printed name of officer administering oath Geraldo G. Acosta



Title of officer administering oath

Page - 2

SUBTOTALS - JC/OH

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

201782

19 FILER NAME RICHARD C. VARA		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 1,635.00
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 678.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

Page - 3

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

201782

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST RICHARD	MI C.
	NICKNAME	LAST VARA	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	2001 FOREST HILL HOUSTON, TX 77023		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	274-3999	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST JESSE	MI
	NICKNAME	LAST GARCIA	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	10030 BRIAR PARK TRAIL LN. HOUSTON, TX 77064		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(832)	692-4382	
9 REPORT TYPE	<input checked="" 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 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)		
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	7 / 01 / 2016		12 / 31 / 2016
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
	11 / 8 / 2016		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	JUSTICE OF THE PEACE PCT. 6 PL. 1		

Page - 4

GO TO PAGE 2

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:	2 FILER NAME RICHARD C. VARA	3 Filer ID (Ethics Commission Filers)
----------------------------	---------------------------------	---------------------------------------

4 Date 12/10/16	5 Payee name JOSE RAMIREZ
--------------------	------------------------------

6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 3427 WINDY ROYAL HOUSTON, TX 77045
---------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PRINTING & PHOTOS	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
--------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date 12/22/16	Payee name HERNANDEZ CATERING
------------------	----------------------------------

Amount (\$) \$200.00	Payee address; City; State; Zip Code 170 ANNETTE LANE HOUSTON, TX 77076
-------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) RECEPTION	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/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$) \$	Payee address; City; State; Zip Code
-------------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	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/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J)1:

2 FILER NAME
RICHARD C. VARA

4 Date 7/19/16	5 Full name of contributor VIRGINIA R. MONTES	out-of-state PAC ID#: _____	7 Amount of contribution (\$) \$135.00
	6 Contributor address: 4502 PARK DR.	City; State; Zip Code HOUSTON, TX 77023	

8 Contributor's principal occupation	9 Contributor's job title INDIVIDUAL
--------------------------------------	---

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 9/16/16	Full name of contributor HAA BETTER GOVERNMENT FUND	out-of-state PAC ID#: _____	Amount of contribution (\$) \$1,500.00
	Contributor address: 4810 WESTWAY PARK BLVD.	City; State; Zip Code HOUSTON, TX 77041	

Contributor's principal occupation	Contributor's job title POLITICAL ACTION GROUP
------------------------------------	---

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	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.