

Official Public Records of Harris County
Stan Stanart
County Clerk

## Campaign Finance Report

OF HARRIS GOLD THE STATE OF THE

tan Stanart

COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo:

201721

Received By Clerk:

1/12/2017

File Date:

1/12/2017 11:53:07 AM

Office:

Constable Pct. 5

Candidate:

Camus, Philip

Treasurer:

Fleming, Michael

Category:

**Contributions And Expenditures** 

**Delivered By:** 

Courier

Type:

COR

**Harris County No Fee** 

### **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

#### FORM C/OH **COVER SHEET PG 1**

The C/OH Instruction G	uide explains how to complete this form.  1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	NICKNAME  NICKNA	OFFICE USE ONLY  Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	Camus  ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP CODE  3525 Sage, Unit. 1517  Houston, Tx. 77056	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION .  (713) 826-1549	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI  MICHAEL  NICKNAME LAST SUFFIX	Receipt # Amount \$  Date Processed  Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	Fleming  STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;  19221 Its South, Suite 300  Connoe, Tx M7385	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION	
9 REPORT TYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month  101/2016 THROUGH  12/	31 / 2016
11 ELECTION	Month Day Year Primary Runoff Other Description  General Special	
12 OFFICE	Harris County Constable	1)
	GO TO PAGE 2	

#### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

			١			
14 C/OH NAME	Lamu	-S	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.					
	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	SPECIFIC	COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages						
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER T ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00			
EXPENDITURE TOTALS	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,     UNLESS ITEMIZED		\$ 0.00			
	\$1259.09					
CONTRIBUTION BALANCE	5. TOTAL OF REF	\$ 4450.04				
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O AY OF THE REPORTING PERIOD	F THE \$			
18 AFFIDAVIT	<u> </u>					
		true and correct and includes all i	of perjury, that the accompanying report is nformation required to be reported by me			
My My	JOHN A. MARANTO Notary Public STATE OF TEXAS Comm. Exp. Feb. 06, 2	: Old Cimil	<i>S</i>			
Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEALABOVE						
Sworn to and subscribed before me, by the said PAIL CANUS, this the day of JANUARY, 2017, to certify which, witness my hand and seal of office.						
DIMUNE JOHN A MARANTO NOTARY DUBLIC						
Signature of officer	administering oath	Printed name of officer administering oath	Title of officer administering oath			

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

19	9 FILER NAME 20 Filer ID (Ethics Co		mmission Filers)	
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2.	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 COL	NTRIBUTIONS	\$ 1254.09	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	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 FUN	NDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$	

# 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/Politica Credit Card Payment	Fees O Food/Beverage Expense Pi Gift/Awards/Memorials Expense Pi	oan Repayment/Reimbursement ffice Overhead/Rental Expense olling Expense rinting Expense alaries/Wages/Contract Labor ow to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)					
Total pages Schedule F1:	2 FILER NAME Camus		3 Filer ID (Ethics Commission Filers)					
1 Date 12-1-2016	5 Payee name 1 Margaret Shei	eley						
4mount (\$) 254,42	7 Payee address: City; State; Zip C 3525 Sage House	1 11	056					
B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche frunting explende Unstructured Cando	Check if travel ou	tside of Texas. Complete Schedule T. , TX, officeholder living expense					
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held					
Date	Payee name	***************************************						
11-15-2016	1 1 21.	SA						
4 584.67	Payee address: City: State: Zipo 1950 Eldridge Pan Houston, TX 7709	coo. Kupy,#9306						
PURPOSE OF EXPENDITURE	category (See Categories listed at the top of this sche Event expense reimbursement: Kra 31.40,15.99-Sams-10128,4	Check if travel out	tside of Texas. Complete Schedule T. , TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held					
Date	Payee name							
12-21-16	Shawn Grahan	<b>1</b>						
Amount (\$)	Payee address; City; State; Zip	Code						
\$ 420.00	AZIGII ACACIA DO Magnolia, TX 77355	ż						
PURPOSE OF EXPENDITURE	category (See Categories listed at the top of this sche Gifts reimbursement for gi for clarks (Tanget)	Check if travel ou	tside of Texas. Complete Schedule T. , TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED