



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

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: **9**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: _____ FIRST: RICHARD MI: _____ NICKNAME: _____ LAST: CANTU SUFFIX: _____	OFFICE USE ONLY
--	--	------------------------

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: _____ CITY; STATE; ZIP CODE 11015 CATAMORRE, HOM. TX 77076
---	---

5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: (346) PHONE NUMBER: AAA-0624 EXTENSION: _____	Date Received
---	--	---------------

6 CAMPAIGN TREASURER NAME	MS / MRS / MR: MS. FIRST: JOYCE MI: _____ NICKNAME: _____ LAST: WILEY SUFFIX: _____	Date Hand-delivered or Date Postmarked Receipt # _____ Amount \$ _____ Date Processed _____ Date Imaged _____
----------------------------------	---	--

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: _____ CITY; STATE; ZIP CODE 2230 HIALEAH, HOM. TX. 77018
--	--

8 CAMPAIGN TREASURER PHONE	AREA CODE: (713) PHONE NUMBER: 598-2371 EXTENSION: _____
-----------------------------------	--

9 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"/> 6th 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 5 / 13 / 2018 THROUGH 6 / 30 / 2018
--------------------------	--

11 ELECTION	ELECTION DATE: Month Day Year 11 / 6 / 2018	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
--------------------	---	--

12 OFFICE OFFICE HELD (if any) NONE	13 OFFICE SOUGHT (if known) COUNTY SCHOOL TRUSTEE, POS. 3
---	--

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME RICHARD CANTU 15 Filer ID (Ethics Commission Filers)

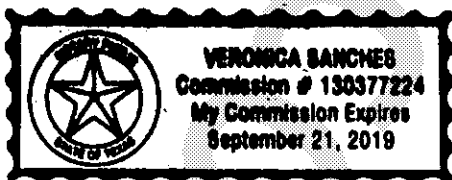
16 NOTICE FROM POLITICAL COMMITTEE(S) THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES 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

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>953.00</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>1406.07</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>656.58</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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]
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Richard Cantu, this the 16th day of July, 2018, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Veronica Sanchez
Printed name of officer administering oath

Notary of TX
Title of officer administering oath

SUBTOTALS - C/OH **FORM C/OH
COVER SHEET PG 3**

19 FILER NAME RICHARD CAWTH 20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 953. ⁰⁰
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1606. ⁰⁷
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	\$

UNOFFICIAL COPY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

2018470

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)
4 Date 5/14/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAROLINA JIMENEZ	7 Amount of contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 1234 NOMAIL ST. HOV. TX 77064		
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions)
Date 5/28/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARON AZIOS	Amount of contribution (\$) \$5.00
Contributor address; City; State; Zip Code 6227 WYNNWOOD HOV. TX 77008		
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions)
Date 6/18/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALICE LEE	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4922 VALLETTA HOV. TX 77096		
Principal occupation / Job title (See Instructions) PARTNER		Employer (See Instructions) HAWES HILL \$ ASSOC,
Date 6/26/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUDY HOYA	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1206 SUNNY DR. HOV. TX 77037		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) ALDINE ISD
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

Page - 5

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

2018470

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)
4 Date 6/28/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARON AZIOS	7 Amount of contribution (\$) \$ 3.00
6 Contributor address; City; State; Zip Code 6227 WYNNWOOD HOUSTON TX 77008		
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions)
Date 6/28/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWT NEWMAN	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SOLID IT NETWORKS
Date 6/29/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLOS DE HONDOS	Amount of contribution (\$) \$ 20.00
Contributor address; City; State; Zip Code 744 DORCHESTER HOUSTON TX 77022		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6/29/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORGE COTTE	Amount of contribution (\$) \$ 25.00
Contributor address; City; State; Zip Code 2134 RIVERLEANN DR. HOUSTON TX 77339		
Principal occupation / Job title (See Instructions) MARKETING DIRECTOR		Employer (See Instructions) SERVICE CORP. INTL.
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

Page - 6

MONETARY POLITICAL CONTRIBUTIONS

. 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)
4 Date 6/30/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STACEY SMITH	7 Amount of contribution (\$) \$ 20.00
6 Contributor address; City; State; Zip Code 13415 VAUPOH HOLLY HWY HOUSTON TX 77044		
8 Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		9 Employer (See Instructions) ALDINE ISD
Date 6/30/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEBORAH FOSTER	Amount of contribution (\$) \$ 20.00
Contributor address; City; State; Zip Code 4210 CASTLEDALE HOUSTON TX 77093		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) U.S. EEOC
Date 7/4/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARVELINE JOSEPH HOWARD	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code 12303 WEST VILLAGE HOUSTON TX 77039		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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 FILER NAME RICHARD CANTU	3 Filer ID (Ethics Commission Filers)
----------------------------	--------------------------------------	---------------------------------------

4 Date 5-13-18	5 Payee name A to Z SPECIALTIES
--------------------------	---

6 Amount (\$) \$167.79	7 Payee address; City; State; Zip Code 2111 HARDENWAY HOUSTON, TX. 77093
----------------------------------	--

B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PRINTING EXPENSE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LABELS
------------------------------------	---	--

B Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 5/12/18	Payee name GLORIA PALMER
------------------------	------------------------------------

Amount (\$) \$300.00	Payee address; City; State; Zip Code 7413 PARKER RD. HOUSTON, TX. 77016
--------------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) POLLING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CHURCH OUTREACH
-------------------------------	--	---

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

Date 5/18/18	Payee name GLORIA PALMER
------------------------	------------------------------------

Amount (\$) \$800.00	Payee address; City; State; Zip Code 7413 PARKER RD. HOUSTON, TX 77016
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) POLLING EXPENSE	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EARLY VOTE OUTREACH
-------------------------------	--	---

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

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: 2 FILER NAME **RICHARD CANTU** 3 Filer ID (Ethics Commission Filers)

4 Date **5/17/18** 5 Payee name **DONERALI RESTAURANT**

6 Amount (\$) **\$48.80** 7 Payee address; City; State; Zip Code
300 GULFSTATE HWY. TX. 77087

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **FOOD/BEVERAGE EXPENSE** (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense **CAMPAIGN MEETING**

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

Date **5/14/18** Payee name **STAY STOP #53**

Amount (\$) **\$59.53** Payee address; City; State; Zip Code
202 N. LOOP WEST HWY. TX. 77018

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **FOOD/BEVERAGE EXPENSE** Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense **VOLUNTEER SNACKS**

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

Date **5/14/18** Payee name **FAMILY DOLLAR**

Amount (\$) **\$122.63** Payee address; City; State; Zip Code
9605 IRVINGTON HWY. TX 77076

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **EVENT/POLLING EXPENSE** Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense **EARLY VOTING SUPPLIES**

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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.

2018470

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: 2 FILER NAME **RICHARD CAJTM** 3 Filer ID (Ethics Commission Filers)

4 Date **5/17/18** 5 Payee name **MCDONALD'S**

6 Amount (\$) **\$37.60** 7 Payee address; City; State; Zip Code **6615 WAYSIDE HOUSTON, TX. 77014**

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **FOOD/BEVERAGE EXPENSE** (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense **VOLUNTEER FOOD**

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

Date **5/18/18** Payee name **LOVES TRAVEL CENTER**

Amount (\$) **\$50.17** Payee address; City; State; Zip Code **3940 MCCARTHY HOUSTON, TX. 77013**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **FUEL/TRANSPORT-EXPENSE ACTION** 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 **5/22/18** Payee name **SHIPLEYS DONUTS**

Amount (\$) **\$19.55** Payee address; City; State; Zip Code **STATE HWY 249 HOUSTON, TX. 77066**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **POLLING EXPENSE** Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense **ELECTION DAY SNACKS**

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED