Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 6

OFFICE USE ONLY
Date Received
Date Hand-delivered or Date Postmarked
Receipt # | Amount
Date Processed
Date Imaged

| | | |
|---|---|---|
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR: MR. FIRST: Richard MI: - NICKNAME: LAST: Cantu SUFFIX: | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 11015 CATAMORE Houston TX 77076 | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE: (713) PHONE NUMBER: 694-1160 EXTENSION: | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR: MRS. FIRST: Yvonne MI: A. NICKNAME: LAST: Cantu SUFFIX: | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 11015 CATAMORE Houston TX 77076 | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE: (713) PHONE NUMBER: 694-1160 EXTENSION: | |
| 9 REPORT TYPE | ☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 15 ☒ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR) | |
| 10 PERIOD COVERED | Month Day Year: 10 / 5 / 03 THROUGH Month Day Year: 10 / 27 / 03 | |
| 11 ELECTION | ELECTION DATE Month Day Year: 11 / 04 / 03 ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special | |
| 12 OFFICE | OFFICE HELD (if any): - | 13 OFFICE SOUGHT (if known): City Council - Dist. H |
| 14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS | ** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** | |
| | Name | |
| ☐ additional pages | Address / PO Box; Apt. / Suite #; City; State; Zip Code | |

RECEIVED OCT 29 2003 CITY SECRETARY

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME: Richard Cantu

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

** This box is for notice of political expenditures 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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

| | | |
|---|---|---|
| 18 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | $ 940.00 |
| | 2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 1800.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED | $ 0 |
| | 4. **TOTAL POLITICAL EXPENDITURES** | $ 3463.99 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | $ 338.72 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ |

19 AFFIDAVIT

I sweer, 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 _____, this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A: 1/2

2 FILER NAME: Richard Cantu

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/15/03 | Mark's Dept. Store<br>[redacted] | 100.00 | |

9 Principal occupation \ Job title (See Intructions) | 10 Employer (See Instructions)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/15/03 | Sabina's Construction<br>[redacted] | 500.00 | |

Principal occupation \ Job title (See Intructions) | Employer (See Instructions)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/11/03 | Oscar Cantu<br>[redacted] | 80.00 | |

Principal occupation \ Job title (See Intructions) | Employer (See Instructions)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/15/03 | Gene Green<br>[redacted] | 1000.00 | |

Principal occupation \ Job title (See Intructions) | Employer (See Instructions)

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/11/03 | Sylvia Reyna<br>[redacted] | 60.00 | |

Principal occupation \ Job title (See Intructions) | Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A: 2/2

2 FILER NAME: Richard Cantu

3 ACCOUNT # (Ethics Commission files)

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/11/03 | Maria Cantu<br>[redacted] | 60.00 | |

| 9 Principal occupation \ Job title (See instructions) | 10 Employer (See instructions) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| | | | |

| Principal occupation \ Job title (See instructions) | Employer (See instructions) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| | | | |

| Principal occupation \ Job title (See instructions) | Employer (See instructions) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| | | | |

| Principal occupation \ Job title (See instructions) | Employer (See instructions) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| | | | |

| Principal occupation \ Job title (See instructions) | Employer (See instructions) |
|---|---|
| | |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME
Richard Cantu

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 10/14/03 | T Mobile<br>P.O. Box 790047 St. Louis, MO 63179-0047 | 460.79 |

| 8 Purpose of payment (See instructions regarding type of information required.) | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held |
|---|---|
| Cell Phone | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 10/22/03 | Gillustrations Inc.<br>5403 S. Rice Ave # 1-D Hou TX 77081 | 378.88 |

| Purpose of payment (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held |
|---|---|
| T-Shirts | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 10/22/03 | North Dist. School Fund<br>5207 Airline Hou TX 77022 | 50.00 |

| Purpose of payment (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held |
|---|---|
| Parade Fee | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| | | |

| Purpose of payment (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held |
|---|---|
| | |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Richard Cantu

3 ACCOUNT # (Ethics Commission Use)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Purpose of expenditure (See instructions regarding type of information required.) | 8 Amount ($) | Reimbursement from political contributions intended |
|---|---|---|---|---|
| 10/13/03 | Office Max<br>1576W. Gray Hou TX | Paper/copies | 107.37 | ☒ |
| 10/19/03 | HEB<br>5450 Airline Hou TX 77076 | Fundraiser Supplies | 44.40 | ☒ |
| 10/9/03 | Teotihuacan<br>4624 Irvington Hou TX 77009 | Business Lunch | 32.96 | ☒ |
| 10/11/03 | AMIGO'S<br>3800 Irvington Hou TX 77009 | Fundraiser Supplies | 13.50 | ☒ |
| 10/22/03 | Sprint Digital Print<br>10100 Clay Rd. Ste.C Hou TX 77080 | Signs | 2376.09 | ☒ |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED