

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.		1 Total pages filed:
2 CANDIDATE NAME	MS / MRS / MR Mr. FIRST Stanley MI M.	OFFICE USE ONLY Filer ID # Date Received NOV 15 2021 BY: <i>[Signature]</i> Date Hand-delivered or Postmarked <i>Hand delivered</i> Receipt # Amount \$ Date Processed Date Imaged
	NICKNAME LAST Warfield SUFFIX Jr	
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 322, Eagle Lake, TX 77434	
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 234-2042	
5 OFFICE HELD (if any)	Justice of the Peace Pct. #4	
6 OFFICE SOUGHT (if known)	Justice of the Peace, Pct. #4	
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX Ms. Rita D. Sunderman	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1066 Lakeview Lane, Eagle Lake, TX 77434	
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 234-7135	
10 CANDIDATE SIGNATURE	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <p><i>[Signature]</i> Signature of Candidate</p> <p>11-15-2021 Date Signed</p>	

GO TO PAGE 2

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

**FORM CTA
PG 1**

See CTA Instruction Guide for detailed instructions.						1 Total pages filed
2 CANDIDATE NAME	MS/MRS / MR	FIRST Stanley	MI M	OFFICE USE ONLY		
	NICKNAME Stan	LAST WARFIELD	SUFFIX			
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: P.O. Box 322	APT / SUITE #	CITY: EAGLE LAKE TX	STATE: TX	ZIP CODE: 77434	FILED FOR RECORD DEC 10 AM 10:31 CO. CLERK
	4 CANDIDATE PHONE	AREA CODE (405)	PHONE NUMBER 762 - 1715	EXTENSION	Date Hand-delivered or Postmarked	
5 OFFICE HELD (if any)						Date Processed
6 OFFICE SOUGHT (if known)	JP. Pct. 4					Date Imaged
7 CAMPAIGN TREASURER NAME	MS/MRS / MR MRS.	FIRST RITA	MI D	NICKNAME SUNDERMAN	LAST	SUFFIX
	8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 1066 LAKEVIEW DR.		CITY: EAGLE LAKE, TX	STATE: TX	ZIP CODE: 77434
9 CAMPAIGN TREASURER PHONE	AREA CODE (979)	PHONE NUMBER 234-7135	EXTENSION			
10 CANDIDATE SIGNATURE	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <p style="text-align: center;"><i>Stan Warfield</i> Signature of Candidate</p> <p style="text-align: right;">12-10-13 Date Signed</p>					
GO TO PAGE 2						

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:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI STANLEY M NICKNAME LAST SUFFIX (STAN) WARFIELD	OFFICE USE ONLY Date Received FILED FOR RECORD COLORADO COUNTY TEX 2014 JAN 10 AM 11:53 Date Hand-delivered or Postmarked JARLENT HAYOK CLERK Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX: APT / SUITE #: CITY, STATE, ZIP CODE P.O. Box 322 EAGLE LAKE, TX 77434		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (405) 762-1715		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI RITA D NICKNAME LAST SUFFIX SUNDERMAN		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE 1066 LAKE VIEW EAGLE LAKE, TX 77434		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 234-7135		
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 / / THROUGH 1 / 10 / 14		
11 ELECTION	ELECTION DATE Month Day Year 11 / 14 / 14	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) JUSTICE OF PEACE PCT. 4 COLORADO, COUNTY TEXAS	
GOTO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME
Stanley Warfield

15 ACCOUNT # (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

COMMITTEE ADDRESS

SPECIFIC

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

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ -0-

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ -0-

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

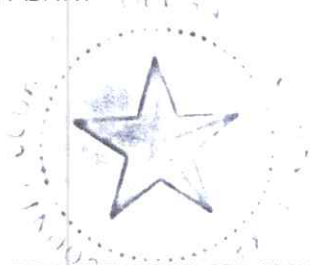
\$

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.

Stanley Warfield
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said **Stanley Warfield**, this the **10th** day of **January**, 20 **14**, to certify which, witness my hand and seal of office.

Jean Perkins
Signature of officer administering oath

Jean Perkins
Printed name of officer administering oath

Chief Deputy Executive Clerk
Title of officer administering oath

TEXAS ETHICS COMMISSION

Physical Address:

201 East 14th St., 10th Floor
Austin, TX 78701

Mailing Address:

P. O. Box 12070
Austin, TX 78711-2070

512-463-5800
TDD 1-800-735-2989

Legal, Administrative, Executive Division FAX: 512-463-5777

Disclosure Filing FAX: 512-463-8808

<http://www.ethics.state.tx.us>

Office Hours: 8:00 a.m. to 5:00 p.m.
Monday through Friday

STAFF

David A. Reisman, Executive Director
Natalia Luna Ashley, Special Counsel
Becky Levy, Director of Disclosure Filing
Jessie Haug, Director of Computer Services
Michael McElhaney, CFO/Director of Administration

Last Revision: November 15, 2013

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IN THE SUPREME COURT OF TEXAS

No. 08-0057

IN RE LARHONDA TORRY, RELATOR

ON PETITION FOR WRIT OF MANDAMUS

PER CURIAM

On January 2, 2008, the deadline by which a candidate must file an application for a place on the March 2008 primary ballot, relator LaRhonda Torry submitted with respondent Gerald Birnberg, Chair of the Harris County Democratic Party, her application and the requisite \$750 filing fee to become a candidate for State Representative, District 147, in the Democratic Party Primary. *See* TEX. ELEC. CODE §§ 172.023(a), 172.024(a)(5). Birnberg accepted Torry's application and filing fee, but rejected her application five days later. Birnberg explained that when Torry submitted her application, she did not have a campaign treasurer appointment on file with the Texas Ethics Commission as the Election Code requires. *See id.* § 252.005(1)(E). Birnberg further stated that the Election Code forbids a candidate: (1) from making a campaign expenditure or accepting a campaign contribution at a time when a campaign treasurer appointment is not in effect; and (2) from accepting a cash contribution exceeding \$100.^[1] *See id.* §§ 253.031(a), 253.033(a). Birnberg concluded that, as a result of these Election Code violations, Torry could not have lawfully paid her filing fee. Torry has since appointed a campaign treasurer.

Torry filed a mandamus petition with the court of appeals, which that court denied. ___S.W. 3d___. Torry now requests that this Court issue a writ of mandamus directing Birnberg to certify Torry's name for placement on the official ballot of the Harris County Democratic Party for the March 4, 2008, general primary election for State Representative, District 147. Sections 161.009 and 273.061 of the

Election Code authorize this Court to issue a writ of mandamus to compel a political party officer to perform a duty imposed by law in connection with an election. TEX. ELEC. CODE §§ 161.009, 273.061.

Birnberg does not contend that Torry has failed to satisfy the qualifications for office of state representative set forth in Article III, Section 7 of the Texas Constitution.^[2] Nor does Birnberg contend that Torry's application failed to comply with the applicable requirements of the Election Code. *See* TEX. ELEC. CODE §§ 141.031, 172.021. Birnberg further acknowledges that Torry paid the \$750 filing fee before 6:00 p.m. on January 2, 2008, the deadline for applying for a place on the ballot. *See id.* § 172.023(a). We cannot locate, and Birnberg does not identify, any Election Code provision that authorizes a party chair to refuse to certify a candidate's name for placement on the ballot on the basis of the candidate's failure to designate a campaign treasurer with the Texas Ethics Commission. Nor does the Election Code authorize a party chair to insert additional certification requirements beyond those prescribed in the Election Code.

Birnberg is correct that the Election Code requires a candidate for state representative to appoint a campaign treasurer and report that appointment to the Texas Ethics Commission. *Id.* §§ 252.001, 252.005(1)(A). Neither statute prescribes a penalty for a candidate's noncompliance with those provisions. Birnberg is also correct in asserting that, pursuant to section 253.031(a), a candidate may not "knowingly accept a campaign contribution or make or authorize a campaign expenditure at a time when a campaign treasurer appointment for the candidate is not in effect" and that a violation of that provision is a Class A misdemeanor. *Id.* § 253.031(a), (f). Additionally, a candidate may not knowingly accept from a contributor in a reporting period a cash contribution that in the aggregate exceeds \$100. *Id.* § 253.033(a). Assuming, without deciding, that Torry violated sections 253.031(a) and 253.033(a) of the Election Code in paying the filing fee, the Penal Code would provide for any appropriate penalty. The Election Code does not authorize Birnberg, as a county party chair, to prescribe his own penalty for a candidate's failure to comply with any of these provisions.

Accordingly, without hearing oral argument, TEX. R. APP. P. 52.8(c), we conditionally grant the writ of mandamus and direct Birnberg to certify Torry as a candidate for State Representative, District 147, and take all necessary steps to include her name on the Democratic Party primary ballot. We are confident Birnberg will promptly comply, and our writ will issue only if he does not.

OPINION DELIVERED: January 25, 2008

[1] Birnberg claims that Torry accepted the \$750 in cash from a woman who accompanied Torry to the headquarters to submit her application and filing fee and that this constituted a campaign contribution.

[2] Article III, Section 7 of the Texas Constitution states: "No person shall be a Representative, unless he be a citizen of the United States, and, at the time of his election, a qualified voter of this State, and shall have been a resident of this State two years next preceding election, the last year thereof a resident of the district for which he shall be chosen, and shall have attained the age of twenty-one years." TEX. CONST. art. III, § 7.

All information is required to be provided unless indicated as optional

APPLICATION FOR A PLACE ON THE DEMOCRAT PARTY GENERAL PRIMARY BALLOT

TO: State/County Chair
 I request that my name be placed on the above-named official primary ballot as a candidate for nomination to the office indicated below.

OFFICE SOUGHT Include any place number or other distinguishing number, if any. <u>COLORADO COUNTY Justice of Peace PET #4</u>	INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED
---	--

FULL NAME (First, Middle, Last) <u>STANLEY MARK WARFIELD</u>	PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT <u>STAN WARFIELD</u>
---	---

PERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rural Rt.) <u>6336 Hiway 90A EAST</u>	MAILING ADDRESS (If different from residence address) <u>P.O. Box 322</u>
--	--

CITY <u>EAGLE LAKE</u>	STATE <u>TX</u>	ZIP <u>77434</u>	CITY <u>EAGLE LAKE</u>	STATE <u>TX</u>	ZIP <u>77434</u>
---------------------------	--------------------	---------------------	---------------------------	--------------------	---------------------

EMAIL ADDRESS (Optional) <u>WARFIELD, STANLEY M</u>	OCCUPATION (Do not leave blank) <u>RETIRED CHERBY</u>	DATE OF BIRTH <u>12/19/1944</u>	COUNTY OF RESIDENCE <u>COLORADO</u>
--	--	------------------------------------	--

TELEPHONE NUMBER (Include area code) (Optional) OFFICE: <u>N/A</u> HOME: <u>405.762.1715 (cell)</u>	Length of Continuous Residence as of Date Application Sworn IN STATE <u>1</u> yr(s) <u>6</u> mos IN COUNTY <u>1</u> yr(s) <u>6</u> mos IN DISTRICT OR PRECINCT <u>1</u> yr(s) <u>6</u> mos
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If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election.

Before me, the undersigned authority, on this day personally appeared (name) Stanley Warfield, who being by me here and now duly sworn, upon oath says: "I, (name) Stanley Warfield, of Colorado County, Texas, being a candidate for the office of Justice of the Peace PET #4, swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the Constitution and laws of this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other official action. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code.

I further swear that the foregoing statements included in my application are in all things true and correct."

Stanley Warfield
 SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at Eagle Lake, this the 6 day of December, 2013.

[Signature]
 Signature of Officer administering oath

Notary Public
 Title of Officer administering oath



TO BE COMPLETED BY CHAIR:
 THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE, PAID BY CASH CHECK MONEY ORDER CASHIERS CHECK OR A PETITION IN LIEU OF FILING FEE

This document and \$ 375.00 filing fee or a nominating petition of _____ pages received.
 (See Section 1.007) 12/6/13 Date [Signature] Signature of Chair

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: 5
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Stanley NICKNAME LAST SUFFIX Warfield	OFFICE USE ONLY <hr/> Date Received FILED FOR RECORD COLORADO COUNTY TX <hr/> Date Hand-delivered or Postmarked 2014 SEP -8 PM 1:56 <hr/> Receipt # Amount MARLENE GAYEK COLORADO CO. CLERK	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE P.O. Box 322 Eagle Lake, TX 77434		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (405) 762-1715 (cell)		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Rita NICKNAME LAST SUFFIX Sunderman		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1066 Lakeview Lane Eagle Lake, TX 77434		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 733-4225 (cell)		
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"/> 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 01 / 16 / 2014 7 / 15 / 2014		
11 ELECTION	ELECTION DATE Month Day Year 11 / 04 / 2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Justice of the Peace, Pct. 4	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Stanley M. Warfield **15 ACCOUNT #** (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

GENERAL

SPECIFIC

additional pages

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	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,130.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 964.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 165.10
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

Stanley M. Warfield
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stanley M. Warfield, this the 8th day of September, 202014, to certify which, witness my hand and seal of office.

Jean Perkins Signature of officer administering oath
JEAN PERKINS Printed name of officer administering oath
Chief Deputy / Early Voting Clerk Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1	
2 FILER NAME STANLEY M. WARFIELD		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/28/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley M. Warfield 6 Contributor address; City; State; Zip Code P.O. Box 322, Eagle Lake, TX 77434	7 Amount of contribution (\$) 1,000.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Minister		10 Employer (See Instructions)	
Date 6/16/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur A. Anderson Contributor address; City; State; Zip Code 112 Laughlin Rd, Eagle Lake, TX 77434	Amount of contribution (\$) 100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Rice Farmer		Employer (See Instructions)	
Date 7/9/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patty Holloway Contributor address; City; State; Zip Code 209 W. Prairie, Eagle Lake, TX 77434	Amount of contribution (\$) 30.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> 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 SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2		2 FILER NAME STANLEY M. WARFIELD		3 ACCOUNT # (Ethics Commission Files)	
4 Date 3/06/14		5 Payee name TRAFCD			
6 Amount (\$) 750.00		7 Payee address; City; State; Zip Code 413 W. Main Eagle Lake, TX 77434			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising (signs)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stanley M. Warfield		Office sought Office held Justice of the Peace, Pct. 4	
Date 3/07/14		Payee name Wells Fargo			
Amount (\$) 39.28		Payee address; City; State; Zip Code 2833 Hwy. 36 S., Sealy, TX 77474			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) check order		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/17/14		Payee name TRAFCD			
Amount (\$) 71.34		Payee address; City; State; Zip Code 413 W. Main, Eagle Lake, TX 77434			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising (magnetic signs)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stanley M. Warfield		Office sought Office held Justice of the Peace, Pct. 4	
Date 4/15/14		Payee name Wells Fargo			
Amount (\$) 10.00		Payee address; City; State; Zip Code 2833 Hwy. 36 S., Sealy, TX 77474			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Bank service charge		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2	2 FILER NAME STANLEY M. WARFIELD	3 ACCOUNT # (Ethics Commission Filers)			
4 Date 6/16/14	5 Payee name TRAFCD				
6 Amount (\$) 69.28	7 Payee address; City; State; Zip Code 413 W. Main, Eagle Lake, TX 77434				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising (magnetic signs)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name Stanley M. Warfield</td> <td style="width:20%;">Office sought Justice of the Peace, Pct. 4</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Stanley M. Warfield	Office sought Justice of the Peace, Pct. 4
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Stanley M. Warfield	Office sought Justice of the Peace, Pct. 4	Office held		
Date 6/16/14	Payee name Wells Fargo				
Amount (\$) 15.00	Payee address; City; State; Zip Code 2833 Hwy. 36 S., Sealy, TX 77474				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Bank Service Charge	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 7/15/14	Payee name Wells Fargo				
Amount (\$) 10.00	Payee address; City; State; Zip Code 2833 Hwy. 36, S., Sealy, TX 77474				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Bank Service Charge	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> 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 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table border="0" style="width:100%;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 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

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
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr. NICKNAME	FIRST Stanley LAST Warfield	MI M. SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX P.O. Box 322	APT / SUITE # Eagle Lake,	CITY TX STATE ZIP CODE 77434
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (405)	PHONE NUMBER 762-1715 (cell)	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs. NICKNAME	FIRST Rita LAST Sunderman	MI D. SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE) 1066 Lakeview Lane	APT / SUITE # Eagle Lake,	CITY TX STATE ZIP CODE 77434
8 CAMPAIGN TREASURER PHONE	AREA CODE (979)	PHONE NUMBER 733-4225 (cell)	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
			<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)
			<input type="checkbox"/> Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month 07	Day 16	Year 2014
	THROUGH		Month 10
			Day 4
			Year 2014
11 ELECTION	ELECTION DATE Month 11	Day 04	Year 2014
	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Justice of the Peace, Pct. 4
GO TO PAGE 2			

OFFICE USE ONLY

Date Received

FILED FOR RECORD
COLORADO COUNTY TX

Date Filed/Received or Postmarked
2014 OCT -2 AM 10:54

Receipt #
Amount

Date Processed
COLORADO CO. CLERK

Date Imaged

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

STANLEY M. WARFIELD

15 ACCOUNT # (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

GENERAL

SPECIFIC

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 \$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 1,460.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$

4. TOTAL POLITICAL EXPENDITURES \$ 1,246.38

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 378.72

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$

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.

Stanley M. Warfield
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stanley Warfield, this the 2nd day of October, 20 14, to certify which, witness my hand and seal of office.

Jean Perkins
Signature of officer administering oath

JEAN PERKINS
Printed name of officer administering oath

Chief Deputy / Early Voting Clerk
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A: 2	
2 FILER NAME STANLEY M. WARFIELD		3 ACCOUNT # (Ethics Commission Files)	
4 Date 8/18/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (OR _____) Harry Anderson 6 Contributor address; City; State; Zip Code P.O. Box 97 Eagle Lake, TX 77434	7 Amount of contribution (\$) \$560.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See instructions) Rice Farmer		10 Employer (See instructions)	
Date 8/19/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR _____) Stan Warfield Contributor address; City; State; Zip Code P.O. Box 322 Eagle Lake, TX 77434	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions) Retired Minister		Employer (See instructions)	
Date 8/19/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR _____) Barbara Hoffman Contributor address; City; State; Zip Code 1051 Hoffman Lane Alleyton, TX 78935	Amount of contribution (\$) \$ 50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 9/5/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR _____) Richard F. Matzat Contributor address; City; State; Zip Code 717 Park Place, Stillwater, OK 74075	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions) Retired		Employer (See instructions)	
Date 9/5/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR _____) Shoe Bank Contributor address; City; State; Zip Code 603 N. Perkins Rd., Stillwater, OK 74075	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions) Retired		Employer (See instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A: <p style="text-align: center;">2</p>	
2 FILER NAME <p style="text-align: center;">STANLEY M. WARFIELD</p>		3 ACCOUNT # (Ethics Commission File)	
4 Date <p style="text-align: center;">9/5/14</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (DR) <p style="text-align: center;">Ed Long</p>	7 Amount of contribution (\$) <p style="text-align: center;">\$100.00</p>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <p style="text-align: center;">2026 S. Iba Drive, Stillwater, OK 774074</p>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See instructions) <p style="text-align: center;">Retired</p>		10 Employer (See instructions)	
Date <p style="text-align: center;">9/12/14</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (DR) <p style="text-align: center;">Sandy Thomson</p>	Amount of contribution (\$) <p style="text-align: center;">\$ 50.00</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">903 Cat Spring Rd., Eagle Lake, TX 77434</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions) <p style="text-align: center;">Retired</p>		Employer (See instructions)	
Date <p style="text-align: center;">9/22/14</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (DR) <p style="text-align: center;">Frances Warfield</p>	Amount of contribution (\$) <p style="text-align: center;">\$300.00</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">P.O. Box 322, Eagle Lake, TX 77434</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions) <p style="text-align: center;">Retired</p>		Employer (See instructions)	
Date <p style="text-align: center;">9/26/14</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (DR) <p style="text-align: center;">Rita Sunderman</p>	Amount of contribution (\$) <p style="text-align: center;">\$100.00</p>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <p style="text-align: center;">1066 Lakeview Lane, Eagle Lake, TX 77434</p>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions) <p style="text-align: center;">Retired</p>		Employer (See instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (DR)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions)		Employer (See instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidates/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2		2 FILER NAME STANLEY M. WARFIELD		3 ACCOUNT # (Ethics Commission Files)	
4 Date 8/15/14		5 Payee name Wells Fargo			
6 Amount (\$) 10.00		7 Payee address; City; State; Zip Code 2833 Hwy 36 S. Sealy, TX 77474			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Bank Charge		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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 9/5/14		Payee name Eagle Lake Headlight			
Amount (\$) 40.00		Payee address; City; State; Zip Code 220 East Main, Eagle Lake, TX 77434			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stan Warfield		Office sought Office held Justice of Peace, Pct. 4	
Date 9/12/14		Payee name Daigle's Creative Impressions			
Amount (\$) 653.40		Payee address; City; State; Zip Code 715 Main Street, East Bernard, TX 77435			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising (signs)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stan Warfield		Office sought Office held Justice of the Peace, Pct. 4	
Date 9/22/14		Payee name Colorado County Citizen			
Amount (\$) 242.55		Payee address; City; State; Zip Code 513 Spring, Columbus, TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stan Warfield		Office sought Office held Justice of the Peace, Pct. 4	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2		2 FILER NAME STANLEY M. WARFIELD		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/22/14		5 Payee name Wells Fargo			
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 2833 Hwy 36 S., Sealy, TX 77474			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Bank Charge		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stan Warfield		Office sought Office held Justice of the Peace Pct. 4	
Date 9/23/14		Payee name Trafco			
Amount (\$) 270.63		Payee address; City; State; Zip Code 413 W. Main, Eagle Lake, TX 77434			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising (signs)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stan Warfield		Office sought Office held Justice of the Peace, Pct. 4	
Date 9/26/14		Payee name WalMart			
Amount (\$) \$24.80		Payee address; City; State; Zip Code WalMart 310 Overcreek Way, Sealy, TX 77474			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Stan Warfield		Office sought Office held Justice of the Peace, Pct. 4	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: STANLEY M. WARFIELD
15 ACCOUNT # (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
 GENERAL
 SPECIFIC

COMMITTEE NAME
 COMMITTEE ADDRESS
 COMMITTEE CAMPAIGN TREASURER NAME
 COMMITTEE CAMPAIGN TREASURER ADDRESS

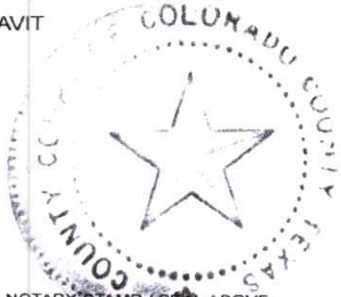
additional pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	300.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	
	4. TOTAL POLITICAL EXPENDITURES	\$	356.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	321.82
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	

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.

Stanley M. Warfield
Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stanley M. Warfield, this the 27th day of October, 2014, to certify which, witness my hand and seal of office.

Kimberly Menke Kimberly Menke Deputy
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

1

2 FILER NAME

STANLEY M. WARFIELD

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/17/14

5 Full name of contributor

Stan Warfield

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)
\$ 100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

P.O. Box 322 Eagle Lake, TX 77434

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Retired Minister

10 Employer (See Instructions)

Date

10/17/14

Full name of contributor

Arthur Anderson

out-of-state PAC (ID# _____)

Amount of contribution (\$)
\$ 100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

112 Laughlin Road, Eagle Lake, TX 77434

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Rice Farmer

Employer (See Instructions)

Date

10/20/14

Full name of contributor

Terry Stedman

out-of-state PAC (ID# _____)

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

116 W. Davitt, Eagle Lake, TX 77434

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Landscape Design

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1	2 FILER NAME STANLEY M. WARFIELD	3 ACCOUNT # (Ethics Commission Filers)
---------------------------------------	--	---

4 Date 10/17/14	5 Payee name NATIONAL PEN COMPANY
---------------------------	---

6 Amount (\$) \$ 346.90	7 Payee address; City; State; Zip Code San Diego, CA
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Stan Warfield	Office sought Justice of the Peace, Pct. 4	Office held
--	--	---	-------------

Date 10/16/14	Payee name Wells Fargo
-------------------------	----------------------------------

Amount (\$) \$ 10.00	Payee address; City; State; Zip Code 2833 S. Hwy 36, Sealy, TX 77474
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Bank Charge	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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

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: 3
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Stanley	MI M.
	NICKNAME	LAST Warfield	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX: P.O. Box 322	APT / SUITE #: Eagle Lake	CITY, STATE, ZIP CODE TX 77434
	AREA CODE (405)	PHONE NUMBER 762-1715 (cell)	EXTENSION
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR Mrs.	FIRST Rita	MI D.
	NICKNAME	LAST Sunderman	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 1066 Lakeview Lane	APT / SUITE #: Eagle Lake,	CITY, STATE, ZIP CODE TX 77434
	AREA CODE (979)	PHONE NUMBER 733-4225 (cell)	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 type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month 10/	Day 28/	Year 2014
11 ELECTION	ELECTION DATE Month Day Year 11/04/14		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	12 OFFICE OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Justice of the Peace, Pct. 4
GO TO PAGE 2			

OFFICE USE ONLY

Date Received

FILED FOR RECORDS
COLORADO

Date Hand-delivered or Postmarked
2014 NOV 12 AM 10:23

Receipt # Amount

Date Processed
COLORADO CLERK

Date Imaged

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME STANLEY M. WARFIELD 15 ACCOUNT # (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

GENERAL

SPECIFIC

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	\$	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	000.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	
	4. TOTAL POLITICAL EXPENDITURES	\$	260.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	60.87
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	

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.

Stanley M. Warfield
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stanley M. Warfield, this the 10th day of Nov., 2014, to certify which, witness my hand and seal of office.

Ruby M. Menke Ruby M. Menke Deputy
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1	2 FILER NAME STANLEY M. WARFIELD	3 ACCOUNT # (Ethics Commission Filers)
---------------------------------------	--	---

4 Date 10/28/2014	5 Payee name EAGLE LAKE HEADLIGHT
-----------------------------	---

6 Amount (\$) \$106.00	7 Payee address; City; State; Zip Code 220 East Main, Eagle Lake, TX 77434
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Stan Warfield	Office sought Justice of the Peace, Pct. 4	Office held
--	--	---	-------------

Date 10/29/2014	Payee name COUNTRY BAKERY
--------------------	------------------------------

Amount (\$) \$ 48.95	Payee address; City; State; Zip Code Hwy. 90A, Eagle Lake, TX 77434
-------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Stan Warfield	Office sought Justice of the Peace, Pct. 4	Office held
--	--	---	-------------

Date 11/07/2014	Payee name EAGLE LAKE HEADLIGHT
--------------------	------------------------------------

Amount (\$) \$106.00	Payee address; City; State; Zip Code 220 East Main, Eagle Lake, TX 77434
-------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) "Thank You" Ad	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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

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: 2
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Stanley M.	OFFICE USE ONLY Date Received FILED FOR RECORD COLORADO COUNTY, TX 2018 MAR -2 PM 1:20 KIMBERLY MENKE ^{SF} COUNTY CLERK Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
	NICKNAME LAST SUFFIX WARFIELD		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE P.O. Box 322 Eagle Lake TX 77434		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (405) 762-1715 (cell)		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Rita D.	Date Hand-delivered or Date Postmarked	
	NICKNAME LAST SUFFIX SUNDERMAN		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE 1066 Lakeview Lane Eagle Lake, TX 77434		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 733-4225 (cell)		
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 type="checkbox"/> July 15 <input checked="" 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 Month Day Year 02 / 03 / 18 THROUGH 02 / 26 / 2018		
11 ELECTION	ELECTION DATE Month Day Year 3 / 6 / 18	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Justice of the Peace Pct. #4	13 OFFICE SOUGHT (if known) Justice of the Peace Pct. #4	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
STANLEY M. WARFIELD

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

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

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.

Stanley M. Warfield

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Stanley M. Warfield, this the 2nd day of March, 20 18, to certify which, witness my hand and seal of office.

Marty Fling

Signature of officer administering oath

Sterling Fling

Printed name of officer administering oath

Deputy

Title of officer administering oath

AMENDMENT: APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM ACTA
PG 1

1 CANDIDATE NAME	2 FILER ID#	3 Total pages filed:
------------------	-------------	----------------------

See ACTA Instruction Guide for detailed instructions.
Use this form for changes to existing information *only*. Do not provide information previously disclosed.

4 CANDIDATE NAME	NEW	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX	OFFICE USE ONLY
			STANLEY	M	STAN	WARFIELD		Date Received FILED FOR RECORD COLORADO COUNTY, TX 2017 NOV 13 PM 4:26 Date Hand-delivered or Postmarked KIMBERLY MENKE COUNTY CLERK Receipt # _____ Amount \$ _____ Date Processed _____ Date Imaged _____
5 CANDIDATE MAILING ADDRESS	NEW	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE		
		PO BOX 322		EAGLE LAKE TX		77434		
6 CANDIDATE PHONE	NEW	AREA CODE	PHONE NUMBER	EXTENSION				
		(405) (979)	762) 234	1715- 2763	Cell Home			

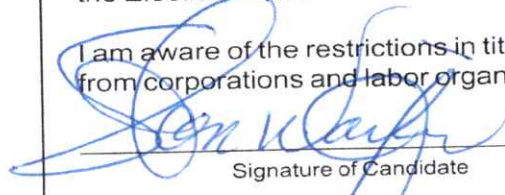
7 OFFICE HELD (if any)	NEW	J.P. Act 4
------------------------	-----	------------

8 OFFICE SOUGHT (if known)	NEW	J.P. Act 4
----------------------------	-----	------------

9 CAMPAIGN TREASURER NAME	NEW	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX
			RITA D.		SUNDERMAN		

10 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	NEW	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE
		1066 LAKEVIEW LN		EAGLE LAKE, TX		77434

11 CAMPAIGN TREASURER PHONE	NEW	AREA CODE	PHONE NUMBER	EXTENSION
		(979)	234-7135	

12 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code. I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.  _____ Signature of Candidate	11-13-17 _____ Date Signed
------------------------	--	----------------------------------

GO TO PAGE 2

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: 2						
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Stanley M. NICKNAME LAST SUFFIX Warfield	<div style="border: 2px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;">OFFICE USE ONLY</p> <p style="font-size: small; margin: 5px 0;">Date Received</p> <p style="font-size: x-large; color: blue; text-align: center; margin: 5px 0;">FILED FOR RECORD COLORADO COUNTY, TX</p> <p style="font-size: x-large; color: blue; text-align: center; margin: 5px 0;">2018 JAN 17 PM 2:39</p> <p style="font-size: large; color: blue; text-align: center; margin: 5px 0;">KIMBERLY MENKE COUNTY CLERK</p> <p style="font-size: small; margin: 5px 0;">Date Hand-delivered or Date Postmarked</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Receipt #</td> <td style="width:50%; border-bottom: 1px solid black;">Amount \$</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Processed</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table> </div>		Receipt #	Amount \$	Date Processed		Date Imaged	
Receipt #	Amount \$								
Date Processed									
Date Imaged									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE P.O. Box 322 Eagle Lake, TX 77434								
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (405) 762-1715 (cell)								
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Rita D. NICKNAME LAST SUFFIX Sunderman								
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1066 Lakeview Lane Eagle Lake, TX 77434								
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 733-4225 (cell)								
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 / / / /								
11 ELECTION	ELECTION DATE Month Day Year 3 06 2018	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special							
12 OFFICE	OFFICE HELD (if any) Justice of the Peace Pct. 4	13 OFFICE SOUGHT (if known) Justice of the Peace, Pct. 4							

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME STANLEY M. WARFIELD 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.

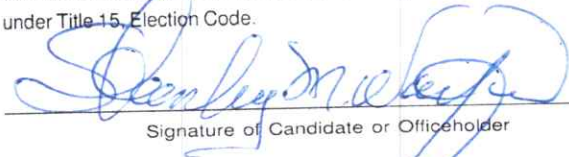
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

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

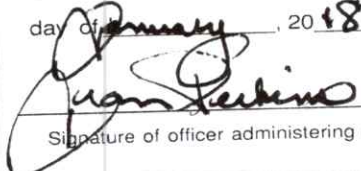
18 AFFIDAVIT

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 Stanley Warfield, this the 17th day of January, 2018, to certify which, witness my hand and seal of office.


Signature of officer administering oath

JEAN PERKINS
Printed name of officer administering oath

Chief Deputy/Early Voting Clerk
Title of officer administering oath

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: 2				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Date Received FILED FOR RECORD COLORADO COUNTY TX 2018 FEB -6 PM 12:02 KIMBERLY MENKE COUNTY CLERK			
	NICKNAME	LAST	SUFFIX				
WARFIELD							
M.							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE		
	P.O. Box 322		Eagle Lake,	TX	77434		
<input type="checkbox"/> Change of Address							
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(405)	762-1715 (cell)					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	NICKNAME	LAST	SUFFIX				
		SUNDERMAN					
		D.					
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE):		APT / SUITE #:	CITY:	STATE:	ZIP CODE	
	1066 Lakeview Lane,		Eagle Lake,	TX	77434		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(979)	733-4225 (cell)					
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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
	1	15	18		2	2	18
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
			<input type="checkbox"/> General	<input type="checkbox"/> Special			
			3	6	18		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
	Justice of the Peace Pct. 4			Justice of the Peace Pct. 4			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME STANLEY M. WARFIELD 15 ACCOUNT # (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

GENERAL

SPECIFIC

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

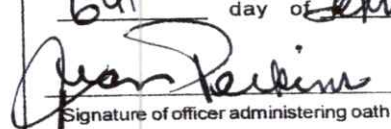
18 AFFIDAVIT

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 STAN WARFIELD, this the 6th day of February, 2018, to certify which, witness my hand and seal of office.


Signature of officer administering oath

JEAN PERKINS
Printed name of officer administering oath

Chief Deputy Secretary
Title of officer administering oath