NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A2:
2 FILER NAME Greg Capers	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#:_____)	8 Amount of Contribution $	9 In-kind contribution description
8-17-15	Calvin + Mark Nelson 7 Contributor address; City; State; Zip Code 210 CR 3420 N Splendora, TX	$200.00 ☐ Check if travel outside of Texas, complete Schedule T	Hog Hunt

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Sales Lehi Power Heavy Tractors	11 Employer (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution $	In-kind contribution description
	Contributor address; City; State; Zip Code	☐ Check if travel outside of Texas, complete Schedule T	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 14

2 FILER NAME: Greg Caceres

3 Filer ID (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 ($)
8-1-15	Hal & Jean Pollock 503 Old Bayou Dr., Dickinson, TX. 77539	$70.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Geologist	Self

Date	Full name of contributor (☐ out-of-state PAC (ID#_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-1-15	Phillip & Theresa McCollough 100 Cemetery Rd., Galveston, TX. 77331	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Repair Shop	Self - Bayou Repair

Date	Full name of contributor (☐ out-of-state PAC (ID#_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-3-15	Eugene Shield 4000 N Fwy Harborside, Galveston, TX 77551	$150.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor (☐ out-of-state PAC (ID#_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-18-15	Neil & Dianna Adams P.O. Box 888 (Rachel Rd) Crystal Beach, TX 77331	$700.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Law Enforcement	San Jacinto County Sheriff's Office

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Greg Capers

3 Filer ID (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 ($)
7-23-15	Reseanna Jean Metzell 1819 Venus, Riverwood Forest TX 77357	$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Administrative Assistant	San Jacinto County

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
7-27-15	David Lynda Garner (Hwy 150) P.O. Box 893 Coldspring, TX 77331	$1,000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Banking	Atwood Rail Road

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
7-29-15	Ralph Steve Schulka (Hwy 1375) P.O. Box 310, New Waverly, TX 77358	$3,000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Law Enforcement	San Jacinto County

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-1-15	Harley & Vickie Loftings 5700 St. Hwy. W 150 New Waverly TX. 77358	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Law Enforcement	San Jacinto County

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME: Greg Capers

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
8-12-15	☐ out-of-state PAC (ID#: ____) Clay Jones Industrial Blvd Sugarland, TX 77511	$2,500.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Owner	Realtor

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-15-15	☐ out-of-state PAC (ID#: ____) Alfred & Debbie Anderson 1974 O'Grady Conroe, TX 77304	$2,500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Owner Anderson Ford	Anderson Ford

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-14-15	☐ out-of-state PAC (ID#: ____) Charles Bennell 5380 W. 34th #350, Houston, TX 77092	$500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Bail Bonds	ABC Bonding

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-14-15	☐ out-of-state PAC (ID#: ____) Gary W. Beltzer 3510 HWY 59 N. Sugarland, TX 77511	$150.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Co-Owner	Dallas Kitchen

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Greg Capers

3 Filer ID (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 ($)
8-12-15	Butch Johnson & Samantha Buford 11W7190 W.F.M. 980 Rest Blanchard TX 77364	$150.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Owners	Safe Storage Lot

Date	Full name of contributor (☐ out-of-state PAC (ID#)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-12-15	Linda & Dalton Currie 161 Slade St Coldspring TX 77331	$250 --

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Educator

Date	Full name of contributor (☐ out-of-state PAC (ID#)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-15-15	David M. Lawrence 101 N Commerce St Madisonville, Tx 77864	$150.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Law Enforcement	Sergeant

Date	Full name of contributor (☐ out-of-state PAC (ID#)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-16-15	Jeannine Daniel 203 S. Avenue H Humble, Tex 77338	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME: Greg Capers

3 Filer ID (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 ($)
8-16-15	Robert Casey 1627 Wood Hue Spring, TEX 77356	$ 350.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Law Enforcement	Retired

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Sigrid Lisa Brewer 41 Lake Way Dr Coldspring, Tx 77331	$ 150.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Acct Manager	SHOFV Dental

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Bobby J. Mills Jr 331 Betty Dr. Cleveland, Tx 77328	$ 1,000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Oil Field	Inspector

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Linda Deeter Coldspring, Tx 77331	70.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Sales	Multi-Media

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Greg Capers

3 Filer ID (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 ($)
8-17-15	Charles E. Shepherd II 206 Branding Iron Livingston, Tex 77351	$ 35.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	Law Information

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Joan M. Benson 7550 Roarks Page Missouri City, Tex 77459	$ 35.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Suzanne V York 325 Lakeview Drive Loop Coldspring, Tx 77331	$ 70.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	School Teacher

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Lloyd A. DeTson 20 Elmwood Ln Coldspring, Tx 77331	$ 35.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Contractor	Contractor

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Capers, Greg

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
8-17-15	Van Brookshire 8130 Highway 150W Coldspring, TX 77331	$35.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Director	Fab Shop

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Jesse Wlasak P.O. Box 630747 Houston, TX 77263	$35.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Contractor	Entrepreneur Contractor

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Jim P. Morris 17178 W. F.M. 1097 Montgomery, TX 77356	$2,500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Construction	Morris Empire

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Stacey Schulze 2017 F.M. 1375 Huntsville, TX 77340	$400.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Dot Tech

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Greg Capers

3 Filer ID (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 ($)
8-17-15	Richard Oviedo	5935 Cutross Close Humble, Tx 77346	$70.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	Chemical Plant

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____))	Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Nick Carter	125 AJ Murry Rd Cleveland, Tex 77328	$70.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Sales	Catholic Diocese

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____))	Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Tracy L. M. Shipley	610 N. Avenue F Humble, Tx 77338	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Law Enforcement	Iwit

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____))	Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Calvin B. Nelson	210 County Rd 3410 Cleveland, Tx 77327	$1000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Sales	Kubota

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME Capers, Greg

3 Filer ID (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 ($)
8-17-15	Jerry D. Stecher LaPorte Tx 77572	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Law Enforcement	Retired

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-18-15	Hanns Schillsten 2100 Aldine Bender Houston, Tx 77039	$ 9,775.00

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 ($)
8-18-15	Beth West 90 Live Oak ST Cottonspring, Tx 77331	50.00

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 ($)
9-18-15	Sharon Carter 125 AJ Murry Rd Cleveland, Tx 77328	$ 1050.00

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Greg Capers

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____)	7 Amount of contribution ($)
8-13-15	J.C. Nails 6 Contributor address; City; State; Zip Code 201 Hwy 150 Ste I I CollSpring, Tx 77327	$100.00
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID# ____)	Amount of contribution ($)
8-16-15	Vickie Staton Porter Contributor address; City; State; Zip Code 560 Horseshoe Way Loop Cleveland, Tx 77328	$100.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID# ____)	Amount of contribution ($)
8-17-15	Joan M. Bensen Contributor address; City; State; Zip Code 9630 Roark's Pgs Missouri City, Tx	35.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		

Date	Full name of contributor ☐ out-of-state PAC (ID# ____)	Amount of contribution ($)
8-17-15	Suzanne York Contributor address; City; State; Zip Code 325 Lakeview Dr Loop CollSpring, Tx 77331	70.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired Educator		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Capers, Greg

3 Filer ID (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 ($)
8-17-15	Lloyd A. Dotson SR 20 Elm Wood Dr Cleveland, TX 77331	$ 35.00

8 Principal occupation / Job title (See Instructions): CARPENTER CONTRACTOR

9 Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	Richard Oviedo 5935 Cul Ross Closp Humble, Tx	$ 70.00

Principal occupation / Job title (See Instructions): Retired

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	SHARON CARTER 125 AJ Murry Rd Cleveland, TX 77328	70.00

Principal occupation / Job title (See Instructions): Retired

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)
8-17-15	VAN BROOKSHIRE 8130 State Hwy 150 West Cold Spring TX 77331	35.00

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.

COPY

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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 Postmarked
Receipt # Amount
Date Processed
Date Imaged

RECEIVED JUL 1 2017 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR (circled) FIRST: Greg MI: M
NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2001 SHAW Rd Cleveland, Texas 77328

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE (281) PHONE NUMBER 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS / MR (circled) FIRST: JAY MI: M
NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2001 SHAW Rd Cleveland, Texas 77328

8 CAMPAIGN TREASURER PHONE
AREA CODE (832) PHONE NUMBER 407 4203 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: 1 / 15 / 17 THROUGH Month Day Year: 7 / 15 / 17

11 ELECTION
ELECTION DATE Month Day Year: 3 / / 18
ELECTION TYPE ☒ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE
OFFICE HELD (if any): SHERIFF OF SAN JACINTO CO.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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	$ 2041.55
	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	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 10,163.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 353.55
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.

REJEANA PILAR MIZELL
Notary Public, State of Texas
My Commission Expires
October 02, 2018

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 14 day of July, 20 17, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers):
4 Date: 1-30-17	5 Payee name: Cold Spring Chamber of Commerce	
6 Amount ($): 250.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 31 N. Butler ST Coldspring, Tex 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (If travel outside of Texas, complete Schedule T): Fundraising Best of SJC
Date: 1-30-17	Payee name: Shepherd Chamber of Commerce	
Amount ($): 30.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: PO Box 520 Shepherd, Texas 77371	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Fees	Description (If travel outside of Texas, complete Schedule T): Membership
Date: 1-31-17	Payee name: Liberty Marketing Co	
Amount ($): 296.55 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 209 N. West St. Arlington, Texas 76011	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (If travel outside of Texas, complete Schedule T): Maps SJC
Date: 2-8-17	Payee name: SJC Bo Texan	
Amount ($): 4200.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 120 Tadsha Rd Shepherd, Tex 77371	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Bo Texan Banquet

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 2-8-17	5 Payee name: Senior Center	
6 Amount ($): 150.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: PO Box 245 Cold Spring, Texas 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (If travel outside of Texas, complete Schedule T): Fish Fry For Senior
Date: 2-10-17	Payee name: SJC Bo Texans	
Amount ($): 300.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 220 Lake Iola Rd Shepherd, Texas 77371	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Bo Texan Banquet
Date: 4-8-17	Payee name: Cape Area V. Fire Dept	
Amount ($): 100.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: PO Box 1665 Cold Spring Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): BBQ Fund Raiser
Date: 4-8-17	Payee name: San Jacinto Co Rep Party	
Amount ($): 300.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 201 State Hwy 150 E Sue TJ Cold Spring, Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Fund Raiser Region D Dinner

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 4-12-17	5 Payee name: Shepherd Youth League	
6 Amount ($): 175.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: PO Box 172 Shepherd, Texas 77371	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (If travel outside of Texas, complete Schedule T): Fund Raiser
Date: 4-21-17	Payee name: Shepherd Chamber Commerce	
Amount ($): 100.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: PO Box 520 Shepherd Texas 77371	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (If travel outside of Texas, complete Schedule T): For 4 July Fireworks
Date: 5-16-17	Payee name: Cold Spring Chamber Commerce	
Amount ($): 86.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: PO Box 980 Cold Spring, Texas 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (If travel outside of Texas, complete Schedule T): Membership
Date: 6-7-17	Payee name: CDYL	
Amount ($): 100.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: P.O. Box Cold Springs Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Fund Raiser

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Grey Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date 6-20-17	5 Payee name Cold Spring Post Office	
6 Amount ($) 40.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 14231 State Highway 156 W Cold Spring Tx 7231	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Post Office Box Rental
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

COPY

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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

OFFICE USE ONLY

Date Received: JAN 17 2017

Date Hand-delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: MR FIRST: Greg MI: M

NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland, Tex 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: MR FIRST: Jay MI: M

NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland, Texas 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: ( ) PHONE NUMBER: 832-407-4203 EXTENSION:

9 REPORT TYPE

- [x] 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 / 31 / 16 THROUGH Month Day Year: 1 / 15 / 17

11 ELECTION

ELECTION DATE Month Day Year: / /

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto, Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 10,077.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 2863.10
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 Greg Capers, this the 12 day of January, 20 17, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G: 1	2 FILER NAME Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11-1-16	5 Payee name Robert Nicholes	
6 Amount ($) $75.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Civis Center Cleveland, Tex	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Fundraiser
Date 12-13-16	Payee name Classic Threads	
Amount ($) 450.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 26311 Hwy 321 ST B Cleveland, Tex 77327	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) For Uni Form
Date 12-13-16	Payee name Annual Banquet Coldspring Civic Center	
Amount ($) 100.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 20 W Cedar Ave Coldspring, Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) For Gifts
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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: 4

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: FIRST: Greg MI: M

NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd Cleveland, Tx 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

(281) 797-1750

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: FIRST: Jay MI: M

NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd Cleveland, Texas 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(832) - 407-4203

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 / 9 / 16 THROUGH Month Day Year: 10 / 31 / 16

11 ELECTION

ELECTION DATE Month Day Year: 11 / 8 / 16

ELECTION TYPE ☐ Primary ☐ Runoff ☑ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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	$ 31,920.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4150.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ N/A
	4. TOTAL POLITICAL EXPENDITURES	$ 10,077.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 3143.10
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.

SAMANTHA COSME
Notary Public, State of Texas
Comm. Expires 08-22-2020
Notary ID 126621422

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 31st day of October, 20 16, 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
Cosme	Samantha Cosme	Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 2

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 9-28-16

5 Payee name: Coldspring Oakhurst High School Floral Dept

6 Amount ($): $80 00

☐ Reimbursement from political contributions intended

7 Payee address; City; State; Zip Code: 1125 Hwy 150 Coldspring Texas 77027

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): Gifts

Date: 10-18-16

Payee name: Chamber of Commerce

Amount ($): $1,000 00

☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 31 Butler ST Coldspring Tex 77331

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T): T-Shirts For Christmas on Square

Date: 10-19-16

Payee name: First Financial Bank

Amount ($): $2840.00

☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 125 Hwy 150 West New Waverly Tex 77358

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Loan Repayment/Reimbursement

Description (If travel outside of Texas, complete Schedule T): Loan/Made by Candidate

Date: 10-19-16

Payee name: First Financial Bank

Amount ($): $13,070.10

☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 125 Hwy 150 West New Waverly, Tex 77358

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Reimbursement

Description (If travel outside of Texas, complete Schedule T): Contribution/Donations Made by Candidate

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Revised 09/28/2011

www.ethics.state.tx.us

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-19-16	5 Payee name San Jacinto Co Fair Association	
6 Amount ($) $2300.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1020 Bales Rd Shepherd, TX 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations	(b) Description (If travel outside of Texas, complete Schedule T) Add on @ Sale
Date 10-28-16	Payee name James Bray	
Amount ($) $275.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code Huffman, Texas	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Delivery Container	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

COPY

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

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt # | Amount

Date Processed

Date Imaged

RECEIVED OCT 21 2016 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS (MR) FIRST: Greg MI: M

NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland, Texas 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS (MR) FIRST: Jay MI: M

NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland, Texas 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: (832) PHONE NUMBER: 407-4203 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: 7 / 15 / 16 THROUGH Month Day Year: 10 / 9 / 16

11 ELECTION

ELECTION DATE Month Day Year: 11 / 8 / 16

ELECTION TYPE: ☐ Primary ☐ Runoff ☑ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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	$ 31,970.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4150.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 23,147.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 23,733.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2840.00

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.

JASON AYERS
Notary Public, State of Texas
Comm. Expires 03-16-2020
Notary ID 130584795

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 11 day of October, 20 16, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Jason Ayers | Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Payee name	6 Amount ($)	7 Payee address; City; State; Zip Code	8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
7-12-16	United States Post Office	56.00 ☐ Reimbursement from political contributions intended	14231 State Hwy 150 W Coldspring, Tex 77331	Office Overhead/Rental Expense	Post Office Box
7-29-16	San Jacinto County Fair Association	225.00 ☐ Reimbursement from political contributions intended	PO Box 804 Coldspring, Texas 77331	Gift/Awards/Memorials Expense	Buckle
8-12-16	Friends of the NRA	400.00 ☐ Reimbursement from political contributions intended	210 Peach ST Cleveland, Texas 77327	Event Expense	Table For 8 People
8-27-16	San Jacinto Fair Association	100.00 ☐ Reimbursement from political contributions intended	PO Box 804 Coldspring Tex 77331	Advertising Expense	Gift

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 8-27-16	5 Payee name: Tracy Blair	
6 Amount ($): 100.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 90 Ripple Creek Coldspring, Tex 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (If travel outside of Texas, complete Schedule T): Gift/Fundraising Expense
Date: 8-27-16	Payee name: Shepherd FFA Alumni	
Amount ($): 300.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 14015 S. Bird Ave. Shepherd 77371	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Solicitation/Fundraising Expense
Date: 8-27-16	Payee name: Shepherd FFA	
Amount ($): 20.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 14015 S. Bird Ave Shepherd, Tex 77371	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Solicitation/Fundraising Expense
Date: 9-2-16	Payee name: San Jacinto County Fair Association	
Amount ($): 700.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: PO Box 804 Coldspring, Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (If travel outside of Texas, complete Schedule T): Banners

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME Capers, Greg

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of contribution ($)
7/12/16	DAVID CRUZAN 6 Contributor address; City; State; Zip Code HUFFMAN, TEXAS	1,000.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
LAW ENFORCEMENT	HARRIS CO SHERIFF DEPT

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

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.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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

OFFICE USE ONLY

Date Received: RECEIVED JUL 1 2016 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Hand-delivered or Postmarked

Receipt | Amount

Date Processed

Determined

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS (MR) FIRST: Greg MI: M NICKNAME LAST: Capers SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland Tex 77328
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS (MR) FIRST: Jay MI: M NICKNAME LAST: Capers SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland, Texas 77328
8 CAMPAIGN TREASURER PHONE	AREA CODE: ( ) PHONE NUMBER: 832-407-4203 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 3/22/16 THROUGH Month Day Year 7/15/16

11 ELECTION: ELECTION DATE Month Day Year 11/1/2016

ELECTION TYPE: ☐ Primary ☐ Runoff ☑ General ☐ Special

12 OFFICE: OFFICE HELD (if any): Sheriff of San Jacinto Co

13 OFFICE SOUGHT (if known):

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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	$ 30,970.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4150.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 23,127.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 23,589.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2840.00

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.

REJEANA PILAR MIZELL
Notary Public, State of Texas
My Commission Expires
October 02, 2018

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 13 day of July, 20 16, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Rejeana Mizell Printed name of officer administering oath | Notary Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 3-12-16

5 Payee name: Pumkin Evergreen Fire Dept

6 Amount ($): 400.00 ☑ Reimbursement from political contributions intended

7 Payee address; City; State; Zip Code: PO Box 344 Coldspring Tx 77331

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Advertising Expense

(b) Description (If travel outside of Texas, complete Schedule T): Fund Raiser ☐ Check if Austin, TX, officeholder living expense

Date: 3-22-16

Payee name: Coldspring Chamber of Commerce

Amount ($): 30.00 ☑ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 31 Butler ST Coldspring, Tex 77021

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event Expense

Description (If travel outside of Texas, complete Schedule T): Luncheon ☐ Check if Austin, TX, officeholder living expense

Date: 4-16-16

Payee name: San Jacinto Co (Holiday Village)

Amount ($): 110.00 ☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: Hwy 190 E Point Blank, Tex 77364

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event Expense (Fund Raiser

Description (If travel outside of Texas, complete Schedule T): Chili Cook Off ☐ Check if Austin, TX, officeholder living expense

Date: 6-24-16

Payee name: Bear Creek Fire Dept

Amount ($): 200.00 ☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: Hwy FM 1725 Cleveland, Tex 77328

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T): Fund Raiser ☐ Check if Austin, TX, officeholder living expense

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

COPY

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 4

OFFICE USE ONLY

Date Received: RECEIVED FEB 22 2016 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Hand-delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: MR. FIRST: Greg MI: M. NICKNAME: LAST: CAPERS SUFFIX:
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX: 2001 SHAW Rd APT / SUITE #: CITY: Cleveland STATE: Tex ZIP CODE: 77328
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION:
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: MR. FIRST: JAY MI: M NICKNAME: LAST: CAPERS SUFFIX:
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 2001 SHAW Rd APT / SUITE #: CITY: Cleveland STATE: Tex ZIP CODE: 77328
8 CAMPAIGN TREASURER PHONE	AREA CODE: (832) PHONE NUMBER: 407-4203 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: 12 / 31 / 15 THROUGH Month / Day / Year: 2 / 22 / 16
11 ELECTION	ELECTION DATE Month / Day / Year: 3 / 1 / 16 ELECTION TYPE ☑ Primary ☐ Runoff ☐ General ☐ Special
12 OFFICE	OFFICE HELD (if any): SHERIFF OF SAN JACINTO COUNTY 13 OFFICE SOUGHT (if known):

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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	$ 30,970.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4,150.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 22,697.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 23899.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2840.00

18 AFFIDAVIT

REJEANA PILAR MIZELL
Notary Public, State of Texas
My Commission Expires
October 02, 2018

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 Greg Capers, this the 22 day of February 20 11, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

REJEANA PILAR MIZELL
Notary Public, State of Texas
My Commission Expires
October 02, 2018

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 1-19-16	5 Payee name: Chamber Luncheon	
6 Amount ($): 30.00 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 31 Butler St. Coldspring, Tex 77029	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (If travel outside of Texas, complete Schedule T): Luncheon
Date: 1-23-16	Payee name: Philips Cash	
Amount ($): 80.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 100 W Semands St Conroe, Texas VFW Post 709	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Cash for Constables
Date: 1-29-16	Payee name: Ted Poe Congressman	
Amount ($): 13.45 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: Washington, DC	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising & Gift Expense	Description (If travel outside of Texas, complete Schedule T): Shipped to Washington
Date: 1-30-16	Payee name: Ducks Unlimited	
Amount ($): 180.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: Memphis, Tenn 38120	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Meals in Cleveland, Tx.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 2-9-16	5 Payee name: Best of San Jacinto Chamber of Commerce	
6 Amount ($): 375.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 31 Butler ST Cold Spring, Tex 77027	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (If travel outside of Texas, complete Schedule T): Table For 18 Fundraiser
Date: 2-10-16	Payee name: San Jacinto Bo Texan	
Amount ($): 600.00 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: PO Box 804 Cold Spring, Tx 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): Table For 12 Fundraiser
Date: 2-11-16	Payee name: G W BBQ	
Amount ($): 44.59 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 150 Hwy Cold Spring, Tex 77027	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T): Campain Worker
Date: 2-19-16	Payee name: G S P	
Amount ($): 70.40 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 1504 Afton Houston, Texas 77090	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (If travel outside of Texas, complete Schedule T): Relect Signs

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

COPY

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: 2

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS (MR) FIRST: Greg MI: M

NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd Cleveland, TX 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE (281) PHONE NUMBER 797 - 1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS (MR) FIRST: Jay MI: M

NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd Cleveland, Tx 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE ( ) PHONE NUMBER 832- 407-4203 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 1 / 15 / 18 THROUGH Month Day Year 7 / 15 / 18

11 ELECTION

ELECTION DATE Month Day Year / /

ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any) Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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	$ 2041.55
	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	$ N/A
	4. TOTAL POLITICAL EXPENDITURES	$ 13,413.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 353.55
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.

REJEANA PILAR MIZELL
Notary Public, State of Texas
My Commission Expires
October 02, 2018

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 13 day of July, 20 18, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name
2-12-2020	US Post Office

6 Amount ($)	7 Payee address; City; State; Zip Code
$375.00 ☐ Reimbursement from political contributions intended CK	1213 E Houston Cleveland, Tx 77327

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Stamps

Date	Payee name
2-13-2020	US Post Office

Amount ($)	Payee address; City; State; Zip Code
$22.00 ☐ Reimbursement from political contributions intended	1100 Highway 190 W Onkhurst Tex 77359

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Stamps

Date	Payee name
2-13-2020	US Post Office

Amount ($)	Payee address; City; State; Zip Code
11.00 ☑ Reimbursement from political contributions intended	14231 Hwy 150 W Coldspring, Tx 77331

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Stamps

Date	Payee name
2-13-2020	US Post Office

Amount ($)	Payee address; City; State; Zip Code
440.00 ☐ Reimbursement from political contributions intended CK	1213 E Houston, ST Cleveland, Tx 77327

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Stamps

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 2-13-2020	5 Payee name: US Post Office	
6 Amount ($): 66.00 ☑ Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code: 14231 State Hwy 150 Coldspring, Tx 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T): Stamps
Date: 2-6-2020	Payee name: Wagamon Printing Inc	
Amount ($): 554.49 ☐ Reimbursement from political contributions intended	Payee address: City: State: Zip Code: 1410 Sycamore Huntsville, Tx 77340	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (If travel outside of Texas, complete Schedule T): Sample Ballot
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address: City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1

2 FILER NAME Capers, Greg

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)
2-13-2020	Earl & Jeri Stanfield 6 Contributor address; City; State; Zip Code 367 CR 2177 Cleveland, Tex 77327	$150.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Owner of Business	Lamb Propane Co

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
2-14-2020	James & Shirley Baker Contributor address; City; State; Zip Code PO Box 157 300 Black Ranch Rd Coldspring Tx 77331	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
2-20-2020	Richard Countiss Contributor address; City; State; Zip Code 121 Edgewater Lane Coldspring, Tx 77331	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

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.

COPY

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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 Otherwise Received

Receipt # Amount

Date Processed

Date Imaged

RECEIVED JAN 1 2020 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS (MR) FIRST: Greg MI: M

NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX: 2001 Shaw Rd APT / SUITE #: CITY: Cleveland STATE: Tex ZIP CODE: 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS (MR) FIRST: JAY MI: M

NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 2001 Shaw Rd APT / SUITE #: CITY: Cleveland STATE: Tex ZIP CODE: 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: (832) PHONE NUMBER: 407-4203 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: 1 / 15 / 2020 THROUGH Month Day Year: 2 / 3 / 2020

11 ELECTION

ELECTION DATE Month Day Year: 3 / 5 / 2020

ELECTION TYPE ☑ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Greg Capers

16 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)	$ 5400.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4. **TOTAL POLITICAL EXPENDITURES**	$ 27,718.45
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 11,298.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 AFFIDAVIT

KERRY CARL HAGAN NOTARY PUBLIC STATE OF TEXAS ID 126722406 EXP. 11-12-2020

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 of Candidate or Officeholder

Sworn to and subscribed before me, by the said Greg Capers, this the 31 day of January, 20 20, to certify which, witness my hand and seal of office

Signature of officer administering oath — Printed name of officer administering oath: KERRY C. HAGAN — Title of officer administering oath: Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Payee name	6 Amount ($)	7 Payee address; City; State; Zip Code	8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
1-15-2020	Brookshire Brothers	132.00 ☑ Reimbursement from political contributions intended CC	14761 Hwy 150 W Coldspring, Texas 77351	Advertising Expense	Postal Stamps
1-15-2020	Century II Printing	505.20 ☑ Reimbursement from political contributions intended CC	1506 N. Washington Livingston, Tex 77351	Advertising Expense	Signs
1-16-2020	Good Promotions	48.71 ☑ Reimbursement from political contributions intended CC	803 E Houston St Cleveland, Tx 77327	Advertising Expense	Campaign Mailouts
1-17-20	Walmart	13.68 ☑ Reimbursement from political contributions intended CC	831 Highway 595 Cleveland, Tx 77327	Advertising Expense	Envelopes

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 1-26-2020	5 Payee name: Tractor Supply	
6 Amount ($): 42.99 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 1725 East Houston, ST Cleveland, Tex 77327	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Advertisting Expense	(b) Description (If travel outside of Texas, complete Schedule T): 1 Post Driver
Date: 1-18-2020	Payee name: Cleveland Post Office	
Amount ($): 55.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 1213 E Houston ST Cleveland, Tx 77327	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertisting Expense	Description (If travel outside of Texas, complete Schedule T): Stamps
Date: 1-21-2020	Payee name: Political Lawn Signs	
Amount ($): 2,711.45 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 916 Byrd Avenue Neenah, WI 54956	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertisting Expense	Description (If travel outside of Texas, complete Schedule T): Signs
Date	Payee name	
Amount ($): ☐ Reimbursement from political contributions intended	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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 2

2 FILER NAME: Capers, Greg

3 Filer ID (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 ($)
1-17-2020	Paul M. Bass 10865 US Hwy 190E Point Blank, Tx 77364	$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	Retired

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)
1-17-2020	Richard Ousman 290 Fallen Dr. Coldspring, Tx 77331	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Captain	United

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)
1-17-2020	Aurora B. Billey, MD 2114 Mount Forest Dr Kingwood, Tx 77345	$1,000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Dr.

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)
1-17-2020	A. Steve Arizpe 19001 Crescent Springs Drive Kingwood Tx, 77339	$2500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Executive	Prosperity

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME: Capers, Greg

3 Filer ID (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 ($)
1-17-2020	Julia R. Ellisor Hoot 200 W FM 2693 Rd W New Waverly, Tx 77358	$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)
1-21-2020	Steve L Roberts 513 S 3rd ST Bellaire, Tex 77401	$1000.00

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 ($)
1-29-2020	John B. Varela 301 McAdams Vane Rd Cleveland Tx 77328	$500.00

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 ($)

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.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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: RECEIVED JAN 1 2020 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Hand Delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: MR FIRST: Greg MI: M

NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX: 2001 SHAW Rd APT / SUITE #: CITY: Cleveland STATE: Texas ZIP CODE: 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: MR FIRST: JAY MI: M

NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 2001 SHAW Rd APT / SUITE #: CITY: Cleveland, Tx STATE: ZIP CODE: 77328

COPY

8 CAMPAIGN TREASURER PHONE

AREA CODE: (832) PHONE NUMBER: 407-4203 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: 7 / 15 / 19 THROUGH Month / Day / Year: 1 / 15 / 2020

11 ELECTION

ELECTION DATE: Month / Day / Year: 3 / 5 / 20

ELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): SHERIFF OF SAN JACINTO COUNTY

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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)	$ 3000.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 24,209.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 7403.55
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.

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 14 day of January, 2020, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Rejeana Mizell Printed name of officer administering oath | Notary Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 9-1-19	5 Payee name: Republican Party	
6 Amount ($): 1000.00 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 201 State Hwy 150 E Suite J Coldspring, Tex 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (If travel outside of Texas, complete Schedule T): Reagan Dinner Table
Date: 9-1-19	Payee name: Republican Party	
Amount ($): 100.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 201 State Hwy 150 E Suite J Coldspring, Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (If travel outside of Texas, complete Schedule T): 100 Club SJC Fair
Date: 10-7-19	Payee name: U S Postal Service	
Amount ($): 46.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 14231 Hwy 150 W Coldspring, Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Fees	Description (If travel outside of Texas, complete Schedule T): PO Box Rental
Date: 10-7-19	Payee name: Coldspring Senior Center	
Amount ($): 297.62 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 60 Butler ST Coldspring, Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food/Beverage Expense Donation	Description (If travel outside of Texas, complete Schedule T): Gift-Swine From Fair

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 12-3-19	5 Payee name: Cold Spring Chamber of Commerce	
6 Amount ($): 350.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: PO Box 980 Cold Spring, Tex 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Event Expense	(b) Description (if travel outside of Texas, complete Schedule T): Parade Sponsor

Date: 12-11-19	Payee name: Cold Spring Chamber of Commerce	
Amount ($): 15.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: PO Box 980 Cold Spring, Tex 77331	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Event Expense	Description (if travel outside of Texas, complete Schedule T): Parade

Date: 12-12-19	Payee name: San Jacinto News Times	
Amount ($): 150.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code:	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (if travel outside of Texas, complete Schedule T): Ad in Paper

Date: 12-13-19	Payee name: The Courier	
Amount ($): 1050.00 ☑ Reimbursement from political contributions intended	Payee address; City; State; Zip Code: 4747 Southwest Freeway Houston, Tex 77027	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (if travel outside of Texas, complete Schedule T): Ad in Paper

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 1-8-2020

5 Payee name: Century II Printing

6 Amount ($): 2536.95 ☑ Reimbursement from political contributions intended

7 Payee address; City; State; Zip Code: 1506 N. Washington Livingston, Tex 77351

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Advertising Expense

(b) Description (If travel outside of Texas, complete Schedule T): Signs

Date: 11-15-19

Payee name: San Jacinto County Republican Party

Amount ($): 750.00 ☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 201 State HWY 150 E. Suit J Coldspring, Tex 77331

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Fees

Description (If travel outside of Texas, complete Schedule T): Filing Fees

Date: 1-8-2020

Payee name: Greg Capers

Amount ($): 5000.00 ☑ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 2001 SHAW Rd Cleveland, TEXAS 77328

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Accounting/Banking

Description (If travel outside of Texas, complete Schedule T): Deposit

Date: 9-19-19

Payee name: Greg Capers

Amount ($): 300.00 ☑ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 2001 SHAW Rd Cleveland, Tex 77328

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Accounting/Banking

Description (If travel outside of Texas, complete Schedule T): Deposit

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1

2 FILER NAME: Capers, Greg

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)
9-23-19	TRACY Nelson	$ 3000.00
	6 Contributor address; City; State; Zip Code: 210 County Road 3420N Cleveland, TEX 77327	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Rancher	SELF

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	
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.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

COPY

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: 2

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

RECEIVED JUL 15 2019 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST: Greg	MI: M	NICKNAME	LAST: Capers
	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX: 2001 Shaw Rd	APT / SUITE #:	CITY: Cleveland	STATE: Tx	ZIP CODE: 77328
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (281)	PHONE NUMBER: 797-1750	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST: Jay	MI: M	NICKNAME	LAST: Capers
	SUFFIX				
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 2001 Shaw Rd	APT / SUITE #:	CITY: Cleveland	STATE: Texas	ZIP CODE: 77328
8 CAMPAIGN TREASURER PHONE	AREA CODE: ( ) 832	PHONE NUMBER: 407-4203	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: 1/15/19 THROUGH Month / Day / Year: 7/15/19

11 ELECTION

ELECTION DATE Month / Day / Year: / /

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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)	$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 13,713.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 503.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 AFFIDAVIT

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

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 Greg Capers, this the 15 day of July, 20 19, 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
	Rejeana Mizell	Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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

OFFICE USE ONLY

RECEIVED JAN 1 2019 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Received
Date Hand-delivered or Postmarked
Receipt #
Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: MR
FIRST: Grey
MI: M
NICKNAME
LAST: Capers
SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland Tx 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: MR
FIRST: Jay
MI: M
NICKNAME
LAST: Capers
SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 2001 Shaw Rd Cleveland, Tx 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: ( ) 832 PHONE NUMBER: 407-4203 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: 7 / 15 / 18 THROUGH Month Day Year: 1 / 15 / 19

11 ELECTION

ELECTION DATE Month Day Year: / /

ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto Co

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G: 1	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name: Bry Capers	
6 Amount ($): 300.00 ☑ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code: 2001 Shaw Rd Cleveland, Tex 77328	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T): Deposit
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

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	$ 2041,55
	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	$ N/A
	4. **TOTAL POLITICAL EXPENDITURES**	$ 13713.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 503,55
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.

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 17 day of January, 20 19, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

COPY

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: 2

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR (MR) FIRST: Greg MI: M

NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd Cleveland, TX 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE (281) PHONE NUMBER 797 - 1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR (MR) FIRST: Jay MI: M

NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd Cleveland, Tx 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE ( ) PHONE NUMBER 832- 407-4203 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 1 / 15 / 18 THROUGH Month Day Year 7 / 15 / 18

11 ELECTION

ELECTION DATE Month Day Year / /

ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any) Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

COPY

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: 3

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: FIRST: GREG MI: M.

NICKNAME: LAST: CAPERS SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 2001 Shaw Rd. APT / SUITE #: CITY: Cleveland STATE: TX ZIP CODE: 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: FIRST: JAY MI: M.

NICKNAME: LAST: CAPERS SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): 2001 Shaw Rd APT / SUITE #: CITY: Cleveland STATE: TX ZIP CODE: 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: (832) PHONE NUMBER: 407-4203 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: 7 / 16 / 17 THROUGH Month Day Year: 1 / 15 / 18

11 ELECTION

ELECTION DATE: Month Day Year: 3 / 6 / 18

ELECTION TYPE: ☒ Primary ☐ Runoff ☐ Other Description ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): SHERIFF SAN JACINTO COUNTY

13 OFFICE SOUGHT (if known):

OFFICE USE ONLY

Date Received: RECEIVED JAN 17 2018 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Hand-delivered or Date Postmarked

Receipt #: Amount $

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

15 Filer ID (Ethics Commission Filers):

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE
- ☐ 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	$ 2041.55
	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	$ N/A
	4. TOTAL POLITICAL EXPENDITURES	$ 13,413.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 353.55
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.

JASON AYERS
Notary Public, State of Texas
Comm. Expires 03-16-2020
Notary ID 130584795

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Greg Capers, this the 17 day of January, 20 18, to certify which, witness my hand and seal of office.

Jason Ayers	Jason Ayers	Notary
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Greg Capers	3 Filer ID (Ethics Commission Filers)
4 Date 9-19-17	5 Payee name Liberty Marketing Company	
6 Amount ($) $200.00/xx ☒ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 301 N. West St. Arlington, TX. 76011	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas, Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Greg Capers	Office sought / Office held Sheriff
Date 10-10-17	Payee name San Jacinto County Fair	
Amount ($) $3,050.00/xx ☒ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1020 Bailes Dairy Road Shepherd, TX 77371	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas, Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Greg Capers	Office sought / Office held Sheriff
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
☐ Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) Description ☐ Check if travel outside of Texas, Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CAMPAIGN FINANCE REPORT

COPY

COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 4

OFFICE USE ONLY

RECEIVED JUL 1 2023 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Received

Date Hand-delivered or Postmarked

Receipt Record

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR (MR circled) FIRST: Greg; MI: M; NICKNAME; LAST: Capers; SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX: 2001 Shaw Rd; APT / SUITE #; CITY: Cleveland; STATE: Tx; ZIP CODE: 77328
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (281); PHONE NUMBER: 797-1750; EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR (MR circled) FIRST: Jay; MI: M; NICKNAME; LAST: Capers; SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 2001 Shaw Rd; APT / SUITE #; CITY: Cleveland; STATE: Tx; ZIP CODE: 77328
8 CAMPAIGN TREASURER PHONE	AREA CODE: (832); PHONE NUMBER: 407-4203; 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: 1 / 15 / 23 THROUGH Month / Day / Year: 7 / 15 / 23
11 ELECTION	ELECTION DATE Month / Day / Year: / / ; ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special
12 OFFICE	OFFICE HELD (if any): Sheriff of San Jacinto Co.
13 OFFICE SOUGHT (if known)	

GO TO PAGE 2

SUPPORT & TOTALS

COVER SHEET PG 2

14 C/OH NAME: Greg Capers

15 ACCOUNT # (Filing Comm. to ...)

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)	$ 21,775.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4. **TOTAL POLITICAL EXPENDITURES**	$ 40,613.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 15,318.18
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.

CYNTHIA L ELLIOTT
Notary Public, State of Texas
My Commission Expires
May 01, 2026
NOTARY ID 673778-4

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 11th day of July, 20 23, to certify which, witness my hand and seal of office.

Cynthia L. Elliott — Signature of officer administering oath

Cynthia L. Elliott — Printed name of officer administering oath

Notary Public — Title of officer administering oath

Gift/Donation/Donation Expense
Legal Services
Food/Beverage Expense
Polling Expense
Polling Services

Travel In State
Travel Out Of State
Other Operating Expense

Grey Capers

4-26-23 Century II Printing

1277.46 1506 N. Washington Livingston, Tex 77351

Advertising Expense | Cards / 4x5 Signs

4-26-23 Shepherd FFA

250.00 Shepherd, Tx 77371

Advertising | Gift/Awards/Memoriale/Expense

1-8-23 Coldspring FFA Shooting Team

400.00 Coldspring, Tx 77331

Advertising | Gift/Awards/Memoriale/Expense

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1

2 FILER NAME: Capers, Greg

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)
3/28/23	A. Steve Arizpe	$15,000.00
	6 Contributor address; City; State; Zip Code: 19001 Cresent Spring Dr Kingwood Dr 77339 Kingwood Tx	

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
6/15/23	Darvon James Webb	$1,000.00
	Contributor address; City; State; Zip Code: 2912 Veva Dr. Pearland, Tx 77584	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

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.

CAMPAIGN FINANCE REPORT

COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 4

OFFICE USE ONLY

RECEIVED JAN 23 2023 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: MR
FIRST: Grey
MI: M
NICKNAME:
LAST: Capers
SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX: 2001 SHAW Rd
APT / SUITE #:
CITY: Cleveland
STATE: Tx
ZIP CODE: 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281)
PHONE NUMBER: 797-1750
EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: MR
FIRST: JAY
MI: M
NICKNAME:
LAST: CAPERS
SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 2001 SHAW Rd
APT / SUITE #:
CITY: Cleveland
STATE: Tx
ZIP CODE: 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: ( )
PHONE NUMBER: 832-407-4203
EXTENSION:

9 REPORT TYPE

☑ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholders only)

☑ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 7 / 15 / 22 THROUGH Month / Day / Year: 1 / 15 / 23

11 ELECTION

ELECTION DATE Month / Day / Year:

ELECTION TYPE ☐ Primary ☐ Runoff ☐ [illegible] ☐ [illegible]

12 OFFICE

OFFICE HELD (if any): SHERIFF OF SAN JACINTO Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

14 C/OH NAME: Greg Caf RS

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS FORM CONTAINS OR POLITICAL CONT TIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPE TURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS E REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME	
☐ GENERAL		
☐ SPECIFIC	COMMITTEE ADDR	
	COMMITTEE NAME	TREASURER NAME
☐ additional pages	COMMITTEE NAME	TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONT PLEDGES, LOANS, OR G JTIONS OF $50 OR LESS (OTHER THAN IANTEES OF LOANS), UNLESS ITEMIZED	$ 0
	2.	TOTAL POLITICAL CC RIBUTIONS (OTHER THAN PLEDGES ANS, OR GUARANTEES OF LOANS)	$ 5,775.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPEN URES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4.	TOTAL POLITICAL EX IDITURES	$ 39,963.70
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRI TIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PER OD	$ 1297.64
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 AFFIDAVIT

RIKKI MICHELLE CANTU
Notary Public, State of Texas
Comm. Expires 12-02-2025
Notary ID 133471937

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 Rikki Cantu, this the 12 day of January 20 23, to certify which, witness my hand and seal of office

Rikki Cantu	Rikki Cantu	Dispatcher
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

Greg Capers

9-9-22 San Jacinto Co Fair Association

100.00 1020 Bailes Dairy Road Shepherd, Tx 77371

Advertising Expense | 100 Club Supporter

10-27-22 United States Postal Service

58.00 14231 State Highway 150 W Coldspring Tx 77331

Fees | P.O. Box

2-24-22 Ernest Bailes Campaign

300.00 1020 Bales Rd Shepherd, Tx 77331

Event Expense | Campaign Fund

6-6-22 Morgan Luttrell Campaign

500.00

Event Expense | Campaign Fund

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME: Greg Capers	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 8-10-22	5 Payee name: San Jacinto Chamber of Commerce	
6 Amount ($): 350.00 ☑ Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code: PO Box 980 Cold Spring Tx 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T): Wolf Creek Car Show
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	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)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

COPY

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 3

OFFICE USE ONLY

Date Received

Date Hand Delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

RECEIVED JUL 4 2022 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR — FIRST: Greg — MI: M

NICKNAME — LAST: Capers — SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd Cleveland, Tx 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR — FIRST: Jay — MI: M

NICKNAME — LAST: Capers — SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2001 Shaw Rd. Cleveland, Tex, 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE ( ) PHONE NUMBER: 832-407-4203 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: 4 / 15 / 22 THROUGH Month / Day / Year: 7 / 15 / 22

11 ELECTION

ELECTION DATE — Month / Day / Year: / /

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto Co

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

SUPPORT & TOTALS

COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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)	$ 5,775.00
3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ -0-
4.	**TOTAL POLITICAL EXPENDITURES**	$ 38,655.70
5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 2,447.64
6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

18 AFFIDAVIT

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

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 Greg Capers, this the 14 day of July, 20 22, to certify which, witness my hand and seal of office

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

Grey Capers

4-10-22 Senior Center Coldspring

250.00 PO Box 145 Coldspring, Tx 77331

Event Expense | Dinner for Seniors

6-18-22 Friends of Hopewell Church

100.00 FM 156 Coldspring, Tex

Event Expense | Juneeth Donation

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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

OFFICE USE ONLY

RECEIVED JAN 1 2022 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Received
Date Hand Delivered or Postmarked
Receipt
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS (MR) FIRST: Greg MI: M
NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX: 2001 Shaw Rd APT / SUITE #: CITY: Cleveland STATE: Tx ZIP CODE: 77328

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (281) PHONE NUMBER: 797 - 1750 EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS (MR) FIRST: Jay MI: M.
NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 2001 Shaw Rd APT / SUITE #: CITY: Cleveland, STATE: Tx ZIP CODE: 77328

8 CAMPAIGN TREASURER PHONE
AREA CODE: ( ) 832 PHONE NUMBER: 407- 4203 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: 7 / 15 / 21 THROUGH Month Day Year: 1 / 15 / 22

~~11 ELECTION~~
~~ELECTION DATE~~ Month Day Year / /
~~ELECTION TYPE~~ ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE
OFFICE HELD (if any): Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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)	$ 5,775.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4. **TOTAL POLITICAL EXPENDITURES**	$ 38,305.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 2,697.64
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 AFFIDAVIT

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

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 Greg Capers, this the 12 day of February, 20 22, to certify which, witness my hand and seal of office

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Expenses	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 8-10-21

5 Payee name: SJC Fair Association

6 Amount ($): 505.00 ☑ Reimbursement from political contributions intended

7 Payee address; City; State; Zip Code: PO Box 804 Coldspring, Tx 77331

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Advertising Expense

(b) Description (If travel outside of Texas, complete Schedule T): Sign @ Rodeo

Date: 12-4-21

Payee name: Multi Media Services

Amount ($): 1082.50 ☑ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: PO Box 1000 Cold Spring, Tx 77331

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T): Lapel Pin/Tie Tack

Date: 12-8-21

Payee name: Hood Promotions

Amount ($): 325.00 ☑ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 803 East Houston Cleveland, Tx 77327

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising

Description (If travel outside of Texas, complete Schedule T): Re-Elect Pens

Date:

Payee name:

Amount ($): ☐ Reimbursement from political contributions intended

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):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

COPY

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 3

OFFICE USE ONLY

Date Received: RECEIVED JUL 3 2021 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: (MR)

FIRST: Greg

MI: M

NICKNAME

LAST: CAPERS

SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2001 SHAW Rd Cleveland, Tx 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) PHONE NUMBER: 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: (MR)

FIRST: JAY

MI: M

NICKNAME

LAST: CAPERS

SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2001 SHAW Rd Cleveland Tx 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: (832) PHONE NUMBER: 407-4203 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: 1 / 15 / 21 THROUGH Month / Day / Year: 7 / 15 / 21

11 ELECTION

ELECTION DATE: Month / Day / Year: / /

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): SHERIFF OF SAN JACINTO CO.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS FORM FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY ONLY 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 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)	$ 5775.00

EXPENDITURE TOTALS

	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4. TOTAL POLITICAL EXPENDITURES	$ 36,393.20

CONTRIBUTION BALANCE

	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4285.14

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.

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Greg Capers, this the 13 day of July 2021, to certify which, witness my hand and seal of office.

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Award/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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Rent	Polling Expense	Office Overhead/Rental Expense	

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers)

4 Date: 4-15-21

5 Payee name: Coldspring Senior Center

6 Amount ($): 200.00

☐ Reimbursement from political contributions intended

7 Payee address: City: State: Zip Code: PO Box 145 Coldspring Tx 77331

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Event Expense

(b) Description (If travel outside of Texas, complete Schedule T): Dinner For Senior

Date: 3-11-21

Payee name: Greg Capers

Amount ($): 5.00

☐ Reimbursement from political contributions intended

Payee address: City: State: Zip Code: 2001 Shaw Rd Cleveland, Tx 77328

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Accounting / Banking

Description (If travel outside of Texas, complete Schedule T): Deposit

Date:

Payee name:

Amount ($):

☐ Reimbursement from political contributions intended

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):

Date:

Payee name:

Amount ($):

☐ Reimbursement from political contributions intended

Payee address: City: State: Zip Code:

PURPOSE

Category (See categories listed at the top of this schedule):

Description (If travel outside of Texas, complete Schedule T):

COPY

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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: 2

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

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR (MR) FIRST: Greg MI: M
NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2001 Shaw Rd Cleveland Texas 77328

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE (281) PHONE NUMBER 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS / MR FIRST: Jay MI: M
NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2001 Shaw Rd Cleveland, Texas 77328

8 CAMPAIGN TREASURER PHONE
AREA CODE ( ) PHONE NUMBER 832 - 407 - 4203 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 7 / 15 / 2020 THROUGH Month Day Year 1 / 15 / 2021

11 ELECTION
ELECTION DATE Month Day Year / /
ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE
OFFICE HELD (if any) Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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)	$ 5775.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 36,188.20
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4480.14
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 AFFIDAVIT

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

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 Greg Capers, this the 11 day of January, 20 21, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Rejeana Mizell | Title of officer administering oath: Notary

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

COPY

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 3

OFFICE USE ONLY

Date Received

Date Hand-Delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

RECEIVED JUL 14 2020 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS (MR) FIRST: Greg; MI: M; NICKNAME; LAST: Capers; SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 2001 SHAW Rd Cleveland, Tx 77328
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (281); PHONE NUMBER: 797-1750; EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / (Mr) FIRST: JAY; MI: M; NICKNAME; LAST: Capers; SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 2001 SHAW Rd Cleveland, Tx 77328
8 CAMPAIGN TREASURER PHONE	AREA CODE: (832); PHONE NUMBER: 407-4203; 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: 2 / 24 / 2020 THROUGH Month Day Year: 7 / 15 / 2020
11 ELECTION	ELECTION DATE Month Day Year: / / ; ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special
12 OFFICE	OFFICE HELD (if any): SHERIFF OF SAN JACINTO Co. ; 13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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)	$ 5775.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4. **TOTAL POLITICAL EXPENDITURES**	$ 36,188.20
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4480.14
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 AFFIDAVIT

LEE ANN BARNES
Notary Public, State of Texas
Comm. Expires 04-20-2021
Notary ID 126969667

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 Lee Ann Barnes, this the 14 day of July, 20 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 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 G:

2 FILER NAME: Greg Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 3-10-2020

5 Payee name: US Post Office

6 Amount ($): $55.00

[X] Reimbursement from political contributions intended

cc

7 Payee address; City; State; Zip Code: 14231 Hwy 150 W Cold Spring 77331

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Advertising Expense

(b) Description (If travel outside of Texas, complete Schedule T): STAMPS

Date: 1-30-2020

Payee name: SMART Resolution

Amount ($): 716.99

[✓] Reimbursement from political contributions intended

cc

Payee address; City; State; Zip Code: 3801 PGA Suite 600 Boulevard Palm Beach Fl 33410

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T):

Date: 1-4-19

Payee name: San Jacinto County Chamber of Commerce Cold Spring

Amount ($): 100.00

[✓] Reimbursement from political contributions intended

cc

Payee address; City; State; Zip Code: PO Box 980 Cold Spring, Tex 77331

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T): Public Sp on Square

Date: 5-11-18

Payee name: San Jacinto Cold Spring Chamber of Commerce

Amount ($): 250.00

[✓] Reimbursement from political contributions intended

cc

Payee address; City; State; Zip Code: PO Box 980 Cold Spring, Tex 77331

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (If travel outside of Texas, complete Schedule T): Wolf Creek Car Show

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

COPY

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

RECEIVED FEB 24 2020 SAN JACINTO COUNTY ELECTION ADMINISTRATOR

Date Received
Date Hand-delivered or Postmarked
Receipt #
Amount $
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS (MR) FIRST: Greg MI: M
NICKNAME LAST: Capers SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2001 Shaw Rd Cleveland, Tex 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE (281) PHONE NUMBER 797-1750 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS (MR) FIRST: Jay MI: M
NICKNAME LAST: Capers SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2001 Shaw Rd Cleveland, Tex 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE (832) PHONE NUMBER 407-4203 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: 2 / 3 / 2020 THROUGH Month Day Year: 2 / 24 / 2020

11 ELECTION

ELECTION DATE Month Day Year: 3 / 5 / 2020

ELECTION TYPE ☑ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Capers

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)	$ 5775.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
	4. TOTAL POLITICAL EXPENDITURES	$ 35,066.21
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4280.14
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 Greg Capers, this the 21 day of Feb, 20 20, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Rejana Mizell | Title of officer administering oath: Notary

REJEANA PILAR MIZELL
Notary ID #4635201
My Commission Expires
October 2, 2022

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Greg M. Capers

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 2-2-2020

5 Payee name: Sams Club

6 Amount ($): 65.77

☐ Reimbursement from political contributions intended

cK

7 Payee address; City; State; Zip Code: 1960 Humble Tx

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Event Expense

(b) Description (if travel outside of Texas, complete Schedule T): Meet & Greet

Date: 2-4-2020

Payee name: U.S. Post Office

Amount ($): 55.55

☑ Reimbursement from political contributions intended

cc

Payee address; City; State; Zip Code: 1213 E. Houston ST Cleveland, Tx 77327

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (if travel outside of Texas, complete Schedule T): STAMPS

Date: 2-5-2020

Payee name: The Sign Printers LLC

Amount ($): 936.36

☐ Reimbursement from political contributions intended

cK

Payee address; City; State; Zip Code: 908 W. Lewis Conroe, Tex 77301

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (if travel outside of Texas, complete Schedule T): Caps

Date: 2-10-2020

Payee name: Office Depot

Amount ($): 1621.59

☐ Reimbursement from political contributions intended

cK

Payee address; City; State; Zip Code: Huntsville, Texas

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising Expense

Description (if travel outside of Texas, complete Schedule T): Paper Folding

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: 5

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: | FIRST: Greg | MI: M

NICKNAME | LAST: Capers | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX: | APT / SUITE #: | CITY: | STATE: | ZIP CODE

2001 Shaw Rd Cleveland Tx 77328

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (281) | PHONE NUMBER: 797-1750 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: | FIRST: Jay | MI: M

NICKNAME | LAST: Capers | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): 2001 Shaw Rd | APT / SUITE #: | CITY: Cleveland, | STATE: Tx | ZIP CODE: 77328

8 CAMPAIGN TREASURER PHONE

AREA CODE: (832) | PHONE NUMBER: 407-4203 | 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 Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 2 / 5 / 24 THROUGH Month / Day / Year: 2 / 26 / 24

11 ELECTION

ELECTION DATE: Month / Day / Year: 3 / 5 / 24

ELECTION TYPE: ☒ Primary ☐ Runoff ☐ Other Description ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Sheriff of San Jacinto Co.

13 OFFICE SOUGHT (if known):

14 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

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	Greg Capers		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$ 0
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 34,825.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 41,584.24
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4,965.09
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

18 SIGNATURE 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

Please complete either option below:

(1) Affidavit

JANE COOKSEY
Notary Public, State of Texas
Comm. Expires 11-13-2024
Notary ID 132781596

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Jane Cooksey this the 26 day of February 2024, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Jane Cooksey | Title of officer administering oath: Communications Supervisor

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____, _____, _____, _____, _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____ (month), 20_____ (year).

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Greg Capers	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☑ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 100.00
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 0
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	$ 0
4.	☐ SCHEDULE E: LOANS	$ 0
5.	☑ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 5046.86
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$ 0
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 0
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$ 0
10.	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$ 0
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 0
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$ 0

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 1

2 FILER NAME: Greg Capers

3 Filer ID (Ethics Commission Filers):

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS: $

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID# ____)	8 Amount of Contribution $	9 In-kind contribution description
2/25/24	James & Brenda Booth 7 Contributor address: 13166 Lazy Lane; City: Willis; State: Texas; Zip Code: 77318	$100.00 ☐ Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions): Retired Law Enforcement

11 Employer (FOR NON-JUDICIAL) (See Instructions):

12 Contributor's principal occupation (FOR JUDICIAL):

13 Contributor's job title (FOR JUDICIAL) (See Instructions):

14 Contributor's employer/law firm (FOR JUDICIAL):

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL):

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL):

Date	Full name of contributor ☐ out-of-state PAC (ID# ____)	Amount of Contribution $	In-kind contribution description
	Contributor address; City; State; Zip Code	☐ Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions):

Employer (FOR NON-JUDICIAL) (See Instructions):

Contributor's principal occupation (FOR JUDICIAL):

Contributor's job title (FOR JUDICIAL) (See Instructions):

Contributor's employer/law firm (FOR JUDICIAL):

Law firm of contributor's spouse (if any) (FOR JUDICIAL):

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL):

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 MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1

2 FILER NAME: Greg Capers

3 Filer ID (Ethics Commission Filers):

4 Date: 2-6-24

5 Payee name: Lake Side Building Supply

City: Cold Spring State: Tx Zip Code: 77331

6 Amount ($): $19.37

7 Payee address: PO Box 429 City: Cold Spring State: Tx Zip Code: 77331

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising Expense

(b) Description: Zip Ties

(c) ☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

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

Date: 2-14-24

Payee name: The UPS Store #4211

Amount ($): 4915.49

Payee address: 502 W Montgomery St. City: Willis State: Tx Zip Code: 77378

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Advertising Expense

Description: Campaign Mailers

☐ 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: 2-24-25

Payee name: Heberts Cajun Food Co

Amount ($): $112.00

Payee address: 12461 State Hwy 156 City: Cold Spring State: Tx Zip Code: 77331

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Event Expense

Description: Food Expense

☐ 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: