# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM SPAC COVER SHEET PG 1

(512)463-5800

<u> </u>									
The SPAC INSTRUCTION GUIDE explains how to complete this form.  1 ACCOUNT # (Ethics Commission filers) 00000005					2 PAGE#				
3	COMMITTEE NAME	2				OFFICE	OFFICE USE ONLY		
ReNew Houston SPAC						Date Received			
						Date Neserved			
4	COMMITTEE	ADDRESS / PO BOX; APT / SUI	TE #;	CITY; S	STATE; ZIP CODE				
	ADDRESS								
		PO Box 541183							
	Change of Address	Houston, TX 77251	Date Hand-delivered	Date Hand-delivered or Date Postmarked					
		MS / MRS / MR	FIRST		MI	Receipt #	Amount		
5	CAMPAIGN TREASURER	Trui			IVII	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,a.		
	NAME		Date Processed .						
		NICKNAME							
		Edn	Date Imaged	Date Imaged					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLE	EASE); APT/SU	ITE#;	CITY; STATE;	ZIP CODE			
	TREASURER'S STREET ADDRESS	1126 Banks							
	(Residence or business)	Houston, TX 77006							
	,								
7	CAMPAIGN	STREET OR PO BOX;	APT/SU	JITE#; (	CITY; STATE;	ZIP CODE			
•	TREASURER'S								
	MAILING ADDRESS	PO Box 541183							
	Change of Address	Houston, TX 77251							
		AREA CODE PHONE NU	IMRER		EXTENSION				
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER EXTENSION							
PHONE		(713) 784-4500							
9	REPORT TYPE	January 15		30th day before	election	Exceeded \$	500 limit		
		X July 15		8th day before e			(attach PAC-DR)		
			Runoff				10th day after campaign		
			<u> </u>	. (3.131)		treasurer term			
10	PERIOD COVERED	Month Day	Year			Month Day	Year		
			_		NOU				
		01/01/2015 THROUGH 06/30/2015							
		<del></del>							
11	ELECTION	ELECTION DATE	ELECTION	TYPE					
		Month Day Year				, , , , , , , , , , , , , , , , , , ,	,,		
			Prima	iry	Runoff	General	Special		
			GO TO	PAGE 2					
			55 15						
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#### Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 SPECIFIC-PURPOSE COMMITTEE REPORT: FORM SPAC COVER SHEET PG 2 **PURPOSE & TOTALS** 12 COMMITTEE ReNew Houston SPAC ACCOUNT # (Ethics Commission filers) NAME 00000005 CANDIDATE / OFFICEHOLDER NAME CANDIDATE 13 COMMITTEE **PURPOSE** (Attach lists on plain paper to complete this OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) OFFICEHOLDER report if necessary.) SUPPORT BALLOT IDENTIFICATION / # **ELECTION DATE** (Candidate or Measure) Month Day Year OPPOSE (Candidate or Measure) DESCRIPTION □ ASSIST MEASURE (Officeholder only) 14 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00 TOTAL POLITICAL CONTRIBUTIONS \$ 0.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 4,185.88 CONTRIBUTION 5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE \$ OF THE REPORTING PERIOD 0.00 **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS \$ LAST DAY OF THE REPORTING PERIOD 0.00 15 AFFIDAVIT AFFIX NOTARY STAMP / SEAL ABOVE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Signature of Campaign Treasurer Sworn to and subscribed before me, by the said \_\_\_\_\_\_ Truman C. Edminster , this the 15th 15 , to certify which, witness my hand and seal of office.

S.M. Russ

Print name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

#### P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 Texas Ethics Commission POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Legal Services Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Polling Expense Printing Expense Event Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Fees The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# ReNew Houston SPAC 00000005 Schedule: 1/1 Report: 3/4 5 Payee name 4 Date Watson, Patricia & Alan 04/02/2015 6 Amount (\$) Payee address City; State; Zip Code \$4,185.88 Houston, TX 77007 (b) Description 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Reimbursement of Contribution Loan Repayment/Reimbursement OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

### POLITICAL COMMITTEE AFFIDAVIT OF DISSOLUTION

FORM PAC - DR

Page 4 of 4

The Instruction Guide explains how to complete this form.

\*\* Complete only if 'Report Type' on page 1 is marked 'Dissolution' \*\*

1 COMMITTEE NAME

ReNew Houston SPAC

ACCOUNT# (Ethics Commission filers)

00000005

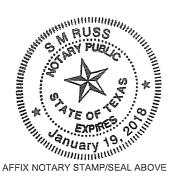
3

#### **Affidavit of Dissolution**

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

Signature of campaign treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED



Sworn to and subscribed before me, by the said				, by the said	Truman C. Edminster			this the	<u>15th</u>	day
of	July	20	15	to cortify which	h witness my hand and s	asl of office				

S.M. Russ

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath