

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	2 Total pages filed: 5
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Brandon	MI
	NICKNAME	LAST Capetillo	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 421 North Burnett Drive Baytown, TX 77520		ZIP CODE
	<div style="border: 1px solid black; padding: 5px;"> <p>OFFICE USE ONLY</p> <p>Date Received: SEP 30 2021 11:53</p> <p>Date Hand-delivered or Date Postmarked: SEP 30 2021 12:08</p> <p>Receipt #</p> <p>Date Processed: SEP 30 2021 PM 12:08</p> <p>Date Imaged: SEP 30 2021 PM 12:08</p> </div>		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Karen	MI
	NICKNAME	LAST Capetillo	SUFFIX
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5713 Bayway Dr. Baytown Texas 77520		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER 281-424 -9117	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 07/01/2021	THROUGH	Month Day Year 10/03/2021
10 ELECTION	ELECTION DATE Month Day Year 11/02/2021		ELECTION TYPE
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) Place Mayor District Baytown Harris	12 OFFICE SOUGHT (if known) Place Mayor District Baytown	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

2 of 5

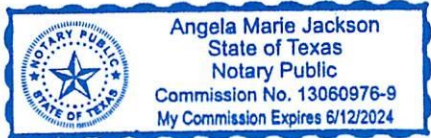
13 C / OH NAME Capetillo, Brandon	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	


16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,700.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	1,412.15
	4. TOTAL POLITICAL EXPENDITURES	\$	4,055.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,204.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFADAVIT

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.




Angela Marie Jackson
State of Texas
Notary Public
Commission No. 13060976-9
My Commission Expires 6/12/2024



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brandon Capetillo, this the 30th day of September, 2021, to certify which, witness my hand and seal of office.



Signature of officer administering

Angela Jackson

Printed name of officer administering

City Clerk/Hobby

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Capetillo, Brandon		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,700.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,055.42
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5
2 FILER NAME Capetillo, Brandon		3 Filer ID
4 Date 09/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Cher & John	7 Amount of Contribution (\$) \$2,000.00
6 Contributor address; City; State; Zip Code 124 N Burnett Baytown, TX 77520		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions)
Date 09/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadjar, David & Bennie	Amount of Contribution (\$) \$1,200.00
Contributor address; City; State; Zip Code 4214 Carlisle Ct Baytown, TX 77521		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions)
Date 08/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Sharon	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 4 Bayvilla Baytown, TX 77520		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: Sch: 1/1 Rpt: 5/5	2 FILER NAME Capetillo, Brandon	3 Filer ID
4 Date 09/27/2021	5 Payee name HLSR Baytown/Highlands Metro Go Texan	
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 3 NRG Park Houston, TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2021	Payee name Saltgrass	
Amount (\$) \$168.52	Payee address; City; State; Zip Code 4400 I-10 East Baytown, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss city issues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2021	Payee name Super Cheap Signs	
Amount (\$) \$2,124.75	Payee address; City; State; Zip Code 9200 Waterford Centre Blvd., Suite #100 Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard sign printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held