

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084534	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Oscar M.	MI
	NICKNAME	LAST Telfair	SUFFIX
OFFICE USE ONLY			
Date Received JAN 31 2022 RCV			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	7011 Harwin Drive Ste 220		
	Houston, TX 77036		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Michael	MI K
	NICKNAME	LAST Stewart	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;
	320 E. 24th St.		CITY; STATE; ZIP CODE Houston TX 77008
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	832	622	8053
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		Month Day Year
	01/01/2022		THROUGH 01/20/2022
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year 03/01/2022		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
			County Court of Law No. 2

GO TO PAGE 2

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

FORM JC/OH
COVER SHEET PG 2

2 of 9

13 C / OH NAME Telfair, Oscar M. 14 Filer ID (Ethics Commission Filers)
00084534

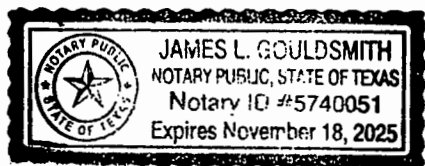
15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
COMMITTEE ADDRESS	
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)	\$	1,875.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,921.84
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,609.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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.

Oscar M. Telfair III

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Oscar M. Telfair, this the 31st day of JANUARY, 2022, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

James L. Gouldsmith
Printed name of officer administering oath

NOTARY
Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Telfair, Oscar M.	19 Filer ID (Ethics Commission Filers) 00084534
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 1,875.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,921.84
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 A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/3 Rpt: 4/9
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 01/06/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Willie (Mr.)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1508 Missouri Ave NW Washington DC, MD 20011		
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Deloise (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2402 Collingsfield Ct Sugar Land, TX 77478		
Contributor's Principal Occupation Retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKamie, Reginald	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1810 antoine dr houston, TX 77055		
Contributor's Principal Occupation legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/3 Rpt: 5/9
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 01/06/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Narcisse, Victor (Mr.)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 815 Anderson St Bellaire, TX 77401		
8 Contributor's Principal Occupation Medical		9 Contributor's Job Title doctor
10 Contributor's employer/law firm medical		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riles, Kevin (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3202 Oakland Lake Circle Missouri City, TX 77459		
Contributor's Principal Occupation Real Estate		Contributor's Job Title realtor
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Chandra (Ms.)	Amount of Contribution (\$) \$275.00
Contributor address; City; State; Zip Code 9418 Fillmont Ave Houston, TX 77044		
Contributor's Principal Occupation Real Estate		Contributor's Job Title agent
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/3 Rpt: 6/9
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 01/05/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) burrell, carlton <hr/> 6 Contributor address; City; State; Zip Code 3005 southern brook pearland, TX 77584	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) esther, marcus <hr/> Contributor address; City; State; Zip Code 1001 texas ave houston, TX 77002	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mallet, patrick <hr/> Contributor address; City; State; Zip Code 2718 Laguna Point Pearland, TX 77584	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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: 2/3 Rpt: 8/9		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 01/10/2022		5 Payee name butler-wiseman			
6 Amount (\$) \$300.00		7 Payee address; City; State; Zip Code 4107 inkberry valley ln houston, TX 77045			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising 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 videos	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/13/2022		Payee name gkd printing			
Amount (\$) \$60.00		Payee address; City; State; Zip Code 7100 regency square blvd houston, TX 77036			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising 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 materials	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/03/2022		Payee name lowe's			
Amount (\$) \$185.29		Payee address; City; State; Zip Code 3807 fm missouri city, TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising 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 supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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: 3/3 Rpt: 9/9	2 FILER NAME Telfair, Oscar M.	3 Filer ID (Ethics Commission Filers) 00084534
4 Date .01/12/2022	5 Payee name minuteman press	
6 Amount (\$) \$436.79	7 Payee address; City; State; Zip Code 9000 sw fwy ste 100 houston, TX 77074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held