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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7715

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:

FILED FOR RECORD
'12 JAN 17 AM 11 45
DANA DEBEAUVOIR
TRAVIS COUNTY

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: MR.
FIRST: STANLEY
MI: J.
NICKNAME:
LAST: WILSON
SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
909 THAYER COVE
PFLUGERVILLE TX 78660

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (512)
PHONE NUMBER: 989-3855
EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR:
FIRST: NELDA
MI: WELLS
NICKNAME:
LAST: SPEARS
SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
11116 AMARANTH LANE AUSTIN TX 78753

8 CAMPAIGN TREASURER PHONE
AREA CODE: (512)
PHONE NUMBER: 278-0288
EXTENSION:

9 REPORT TYPE
☒ January 15
☐ July 15
☐ 30th day before election
☐ 8th day before election
☐ Runoff
☐ Exceeded $500 limit
☐ 15th day after campaign treasurer appointment (officeholder only)
☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED
Month Day Year: 12 / 8 / 2011 THROUGH Month Day Year: 1 / 17 / 2012

11 ELECTION
ELECTION DATE Month Day Year: 4 / 3 / 2012
ELECTION TYPE: ☒ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE
OFFICE HELD (if any):

13 OFFICE SOUGHT (if known): TRAVIS COUNTY TAX ASSESSOR-COLLECTOR

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	15 ACCOUNT # (Ethics Commission Filers)
STANLEY J. WILSON	

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)	$ 3350 00/100
3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$
4.	**TOTAL POLITICAL EXPENDITURES**	$ ∅
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 3350 00/100
6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

EXPENDITURE TOTALS (rows 3, 4)
CONTRIBUTION BALANCE (row 5)
OUTSTANDING LOAN TOTALS (row 6)

18 AFFIDAVIT

LISA ANN FAZ
Notary Public
STATE OF TEXAS
Commission Exp. 03-30-2015

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Stanley J. Wilson
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _Stanley J. Wilson_, this the _17_ day of _January_ 20 _12_, to certify which, witness my hand and seal of office.

Lisa A. Faz
Signature of officer administering oath

Lisa A. Faz
Printed name of officer administering oath

Secretary
Title of officer administering oath

www.ethics.state.tx.us   Revised 09/28/2011

POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A: 1 of 2

2 FILER NAME	**3** ACCOUNT # (Ethics Commission Filers)
STANLEY J. WILSON	

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)	**8** In-kind contribution description (if applicable)
1/5/12	STANLEY / RAMONA WILSON **6** Contributor address; City; State; Zip Code 909 THAYER COVE PFLUGERVILLE TX 78660	#150⁰⁰/₁₀₀ (If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		**10** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
1/9/12	UNIVERSAL AUTO TITLE SERVICE Contributor address; City; State; Zip Code 2105 JUSTIN LN #106 AUSTIN TX 78757	#1000⁰⁰/₁₀₀ (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) AUTO TITLE SERVICE		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
1/10/12	FRY AUTO TITLE SERVICE Contributor address; City; State; Zip Code 3005 S. LAMAR BLD. STE B-105A AUSTIN, TX 78704	#750⁰⁰/₁₀₀ (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) AUTO TITLE SERVICE		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
1/11/12	AUTO TITLE SERVICE Contributor address; City; State; Zip Code 2321 B CESAR CHAVEZ AUSTIN TX 78702	#1000⁰⁰/₁₀₀ (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) AUTO TITLE SERVICE		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
1/14/12	AUSTIN RISING FAST MOTOR CARS Contributor address; City; State; Zip Code 8024 IH-35 NORTH AUSTIN TX 78753	#250⁰⁰/₁₀₀ (If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) AUTO SALES		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.

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POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

STANLEY J. WILSON

3 ACCOUNT # (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)	**8** In-kind contribution description (if applicable)
1/14/12	QUALITY PLUMBING **6** Contributor address; City; State; Zip Code 105 OLYMPIC DR. PFLUGERVILLE TX 78660	$200 00/100	 (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		**10** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		 (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

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	Contributor address; City; State; Zip Code		 (If travel outside of Texas, complete Schedule T)
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