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:					
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS (MR) FIRST NICKNAME LAST	MI	OFFICE USE ONLY Date Received 8Y: 100 Aug.		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE/	ADDRESS / PO BOX: APT / SUITE #: _ (CITY: STATE: ZIP CODE EXTENSION	NT COUN		
OFFICEHOLDER PHONE 6 CAMPAIGN TREASURER NAME	MS MRS MR FIRST SAME MAKIN NICKNAME LAST	MI SUFFIX	Date Hand delivered or Date Postmarked No. 20 No. 2		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #; CITY; STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15 30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 01 / 01 / 20/6	THROUGH Month	Day Year / 30 / 7016		
11 ELECTION	ELECTION DATE Month Day Year Primary // 08//6 General	Description			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known			
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME 15 Files			5 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 I 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	COMMITTEE NAME			
	GENERAL		8 7		
		COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE ADDRESS	FRANKA)		
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages		Gommin 122 Gommin 1650 112 1650 112 11	AM S		
		COMMITTEE CAMPAIGN TREASURER ADDRESS	>		
			1: 33 PATOR		
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ Ø		
EXPENDITURE TOTALS	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		s Ø		
	4. TOTAL POLITICAL EXPENDITURES		\$ Ø		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 334, 44		DAY \$ 334,46		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
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. DIANE H. MCALISTER Notary Public, State of Texas My Commission Expires November 05, 2016 AFFIX NOTARY STAMP / SEAL ABOVE					
\mathcal{L}_{1} \mathbf{n}_{1} \mathbf{n}_{2} \mathbf{n}_{3}					
Sworn to and subscribed before me, by the said John M. Garris , this the 15					
Pay of Juy, 20/lo, to certify which, witness my hand and seal of office.					
Again I. Mc alista Diane H. M. Alester Notary					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					