JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The JC/OH Instruction Guide explains how to complete this form. MS MRS / MR 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** NAME SUFFIX LAST NICKNAME 4 CANDIDATE / ADDRESS / PO BOX **OFFICEHOLDER** MAILING **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Receipt # Amount \$ FIRST 6 CAMPAIGN MS / MRS / MR MI **TREASURER** Date Processed NAME SUFFIX NICKNAME LAST Date Imaged STREET ADDRESS (NO PO BOX PLEASE 7 CAMPAIGN STATE ZIP CODE **TREASURER ADDRESS** (Residence or Business) EXTENSION 8 CAMPAIGN AREA CODE PHONE NUMBER **TREASURER** PHONE 9 REPORT TYPE 15th day after campaign 30th day before election Runoff treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD COVERED THROUGH ELECTION DATE ELECTION TYPE 11 ELECTION Month Day Description Special OFFICE HELD (if any) 13 OFFICE SOUGHT 12 OFFICE 14 NOTICE FROM 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 POLITICAL CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

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JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

15 JC/OH NAME		16 Filer II	O (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAT PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	N	\$ Ø
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS))	\$ 0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$ \(\)
	4. TOTAL POLITICAL EXPENDITURES		\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAT		\$
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS CLAST DAY OF THE REPORTING PERIOD	OF THE	* NA.
18 SIGNATURE 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 C	andidate/Of	fficeholder
Places complete either ention below:			
Please complete either option below:			
(1) Affidavit			
NOTARY STAMP/SEAL			
Sworn to and subscribed	before me by this the		day of,
20, to certify which, witness my hand and seal of office.			
Signature of officer administer	ring oath Printed name of officer administering oath	-	Title of officer administering oath
	OR		
(2) Unsworn Declaration			
My name is 100 My address is 100 BOX 1388 . CH TX 75106-USA			
(street) (city) (state) (zip code) (country) Executed in County, State of (month), on the day of (month), 2003.			
Signature of Candidate/Officetiolder (Declarant)			