

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:** 3

**3 CANDIDATE / OFFICEHOLDER NAME**  
 MS / MRS / MR: Archie  
 NICKNAME: Bo  
 FIRST: Hashaw  
 LAST: Hashaw  
 MI: G.  
 SUFFIX: JR.

**OFFICE USE ONLY**  
 Date Received: 2008 FEB 21 PM 2:28  
 Date Hand-delivered or Date Postmarked:  
 Receipt #:  
 Amount:  
 Date Processed:  
 Date Imaged:

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**  
 ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE  
 44 Windmill Dr., Hempstead, TX 77445  
 Change of Address

**5 CANDIDATE / OFFICEHOLDER PHONE**  
 AREA CODE: PHONE NUMBER: EXTENSION:  
 (979) 826-6432

**6 CAMPAIGN TREASURER NAME**  
 MS / MRS / MR: Archie  
 NICKNAME: Bo  
 FIRST: Archie  
 LAST: Hashaw  
 MI: G.  
 SUFFIX: JR.

**7 CAMPAIGN TREASURER ADDRESS**  
 (Residence or business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE  
 44 Windmill Dr., Hempstead, TX 77445

**8 CAMPAIGN TREASURER PHONE**  
 AREA CODE: PHONE NUMBER: EXTENSION:  
 (979) 826-6432

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

**10 PERIOD COVERED**  
 Month Day Year: 02 / 05 / 08 THROUGH Month Day Year: 02 / 21 / 08

**11 ELECTION**  
 ELECTION DATE: Month Day Year: 03 / 04 / 08  
 ELECTION TYPE:  Primary  Runoff  General  Special

**12 OFFICE** OFFICE HELD (if any): Constable Pct. 1  
**13 OFFICE SOUGHT (if known)**: Constable Pct. 1

**14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS**  
 \*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*  
 Name:  
 Address / PO Box; Apt. / Suite #: City; State; Zip Code:  
 additional pages

GO TO PAGE 2

FILED  
WALLER COUNTY CLERK  
ELECTIONS DIVISION

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

**15 C/OH NAME** Archie (Bo) Glenn Hashaw, Jr. **16 ACCOUNT # (Ethics Commission Filers)**

**17 NOTICE FROM POLITICAL COMMITTEE(S)**

-- This box is for notice of political expenditures 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. --

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 52.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

**19 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.

Archie B Hashaw Jr.  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Archie B Hashaw Jr., this the 21<sup>st</sup> day of Feb, 20 08, to certify which, witness my hand and seal of office.

Joanne Gregory Joanne Gregory Notary Public  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:

1

2 FILER NAME

Archie (Bo) Glenn Hashaw, Jr.

3 ACCOUNT # (Ethics Commission files)

4 Date

2-6-08

5 Payee name

The Hotline Press

6 Payee address; City; State; Zip Code

1116 Austin St, Hempstead, TX 77445

7 Purpose of expenditure (See instructions regarding type of information required.)

Political Ad in newspaper  
(If travel outside of Texas, complete Schedule T)

8 Amount (\$)

\$52.00

Reimbursement from political contributions intended

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Reimbursement from political contributions intended

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Reimbursement from political contributions intended

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Reimbursement from political contributions intended

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED