

USE ONLY BLACK INK
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FOR OFFICE USE ONLY	
File # _____	
PM	HD

**CANDIDATE/OFFICEHOLDER
 SWORN REPORT OF
 CONTRIBUTIONS AND EXPENDITURES**
 (Title 15, Texas Election Code)

Full Name of Candidate or Officeholder Ellen Contreras Shelburne	Address of Candidate or Officeholder 730 Ninth Street Hempstead Tx 77445	
Office Held' Waller County Tax Assessor Collector	Office Sought'	
Name of Campaign Treasurer'	Residence or Business Street Address of Campaign Treasurer	
Telephone Number of Campaign Treasurer ()	Date of Election, if applicable	Type of Election, if applicable

For the period January 1, 19 90, through June 30, 19 90.

Type of Report (Check the appropriate box):

<input type="checkbox"/> 30th day before an election ^{4.5}	<input type="checkbox"/> 15th day after appointment of campaign treasurer by an officeholder ¹²	} Total of Unexpended Political Contributions as of December 31: \$ _____
<input type="checkbox"/> 8th day before an election ^{4.6}	<input type="checkbox"/> Annual Report of Unexpended Contributions ¹³	
<input type="checkbox"/> 8th day before a runoff ^{4.7}	<input type="checkbox"/> Amended Report ¹⁴ _____	
<input checked="" type="checkbox"/> July 15 ⁸	(Specify type of report you are amending)	
<input type="checkbox"/> January 15 ⁹		
<input type="checkbox"/> Final Report (Attach Part X-05) ¹⁰		
<input type="checkbox"/> 48 hr. Report Required by Modified Reporting Procedure (Sec. 254.183(b), Texas Election Code) ¹¹		

COMPLETE THE FOLLOWING, if applicable: I have been notified by the following that they accept political contributions or they make political expenditures for me. (Tex. Elec. Code Ann. secs. 254.061(3), (4); 254.091(2)) Attach additional pages if necessary.

Full Name and Address of Political Committee. State whether the committee is a general-purpose (GP) or specific-purpose (SP) committee.	Full Name and Address of the Committee's Campaign Treasurer
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If no reportable activity occurred during this reporting period, indicate that fact below; you may then proceed to Part X-04 and complete the affidavit. If activity occurred, continue with Part X-02, X-03, and X-04.

NO REPORTABLE ACTIVITY OCCURRED DURING THIS REPORTING PERIOD.

See Reverse Side for Footnotes and Instructions

CANDIDATE/OFFICEHOLDER CONTRIBUTIONS AND EXPENDITURE TOTALS

Name of Candidate/Officeholder: _____

TOTALS

Contributions		Expenditures	
1. Total from Column (1), Part X-02 (Money or Equivalent)	\$ _____	8. Total from Column (1), Part X-03 (Cash disbursements & unpaid bills, except loans)	\$ _____
2. Total from Column (2), Part X-02 (Loans of Money other than from Financial Institutions)	\$ _____	9. Total from Column (2), Part X-03 (repayments of loans of money)	\$ _____
3. Total from Column (3), Part X-02 (market value of gifts, services, use of property)	\$ _____	10. Total from Line 3 of contributions total (across)	\$ _____
4. Total Contributions of \$50 and less (include money, gifts, services, use of property, and loans of money)	\$ _____	11. Total Expenditures of \$50 and less (including money, gifts, services, use of property and repayments of loans)	\$ _____
5. Total Contributions for this reporting period (add lines 1, 2, 3, and 4)	\$ _____	12. Total Expenditures for this reporting period (add lines 8, 9, 10, and 11)	\$ _____
6. Total from Column (4), Part X-02 (Loans from Financial Institutions) (optional)	\$ _____	13. Total from Column (3), Part X-03 (payments that were not expenditures) (optional)	\$ _____
7. Total Contributions and Loans for this reporting period (add lines 5 and 6) (optional)	\$ _____	14. Total Expenditures and Payments for this reporting period (add lines 12 and 13) (optional)	\$ _____

AFFIDAVIT

State of Texas
County of Waller

Before me, the undersigned authority, on this day personally appeared Ellen Contreras Shelburne
who being by me here and now duly sworn, upon oath says: "I swear, or affirm, that the accompanying report is true and
correct and includes all information required to be reported by me under Title 15, Election Code."

Ellen C Shelburne

Signature of Candidate or Officeholder

TREASURER OF CANDIDATE
IS NOT AUTHORIZED TO SIGN
FOR CANDIDATE

Sworn to and subscribed before me, by the said Ellen C Shelburne, this
6TH day of July, 19 90, to certify which, witness my hand and seal of office.

Ernestine E Zimmerman

Signature of officer administering oath

Ernestine E Zimmerman
Print name of officer administering oath

Notary Public
Print title of officer administering oath (as listed in
footnote 3 on back)

See Reverse Side for Footnotes