

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512)463-6800

1-800-325-8506

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 CANDIDATE / OFFICEHOLDER NAME	TITLE: FIRST ELLEN MI C. NICKNAME: LAST SHELBURNE SUFFIX	OFFICE USE ONLY <div style="border: 2px solid black; padding: 5px; text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</div> <p style="text-align: center; font-size: 1.2em;">7/14/04</p> Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE P O BOX 1085 HEMPSTEAD, TX 77445		
5 CAMPAIGN TREASURER NAME	TITLE: FIRST ROBERT MI D. NICKNAME: LAST SHELBURNE SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE P O BOX 1085 HEMPSTEAD, TX 77445		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 826-3467		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 02 / 28 / 2004 06 / 30 / 2004		
10 ELECTION	ELECTION DATE: Month 3 / Day 9 / Year 2004 ELECTION TYPE: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) TAX ASSESSOR-COLLECTOR	12 OFFICE SOUGHT (if known) TAX ASSESSOR-COLLECTOR	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** 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:		

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES		SCHEDULE F
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME ELLEN C. SHELBURNE		3 ACCOUNT # (Ethics Commission files)
4 Date 3/15/2004	5 Payee name WALLER TIMES 6 Payee address: WALLER, TX 77484 City: State: Zip Code	7 Amount (\$) 25.50
8 Purpose of payment (See instructions regarding type of information required.) ADVERTISEMENT/THANK YOU		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 3/15/2004	Payee name THE HOTLINE PRESS Payee address: HEMPSTEAD, TX 77445 City: State: Zip Code	Amount (\$) 12.00
Purpose of payment (See instructions regarding type of information required.) ADVERTISEMENT/THANK YOU		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 3/15/2004	Payee name NEWS CITIZENS Payee address: HEMPSTEAD, TEXAS 77445 City: State: Zip Code	Amount (\$) 43.50
Purpose of payment (See instructions regarding type of information required.) ADVERTISEMENT/THANK YOU		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date	Payee name Payee address: City: State: Zip Code	Amount (\$)
Purpose of payment (See instructions regarding type of information required.)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512)463-5800

1-800-325-8608

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

15 C/OH NAME
ELLEN C. SHELBURNE

16 ACCOUNT # (Ethics Commission Req)


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. **

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

18 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)	\$
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 81.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 81.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 AFFIDAVIT



AFFIX NOTARY SEAL

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]
Signature of Candidate or Officeholder

Sworn to and subscribed to by the said ELLEN C. SHELBURNE, this the 14 day of JULY, 2004, to certify which, witness my hand and seal of office.

[Signature] Lela Loewe Elections Admin.
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath