

# 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	MS / MRS / MR FIRST MI <b>MR JOSEPH M</b> NICKNAME LAST SUFFIX <b>Joey Williams</b>	<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>OFFICE USE ONLY</b></p> <p>Date Received</p> <p style="text-align: center; font-size: 2em; margin: 10px 0;">2010 JUL 15 PM 2:43</p> <p>Date Hand-delivered or Date Postmarked</p> <p>Receipt # Amount</p> <p>Date Processed</p> <p>Date Imaged</p> </div> <p style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 0.8em; margin-top: 10px;">RECEIVED WALLER COUNTY CLERK ELECTIONS DIVISION</p>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>78 Windmill Dr. Hempstead TX 77445</b>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>(979) 826-4551</b>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <b>MRS AMY</b> NICKNAME LAST SUFFIX <b>WILLIAMS</b>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>78 Windmill Dr. Hempstead TX 77445</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>(979) 826-4551</b>		
9 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)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year <b>4 / 4 / 10    THROUGH    6 / 30 / 10</b>		
11 ELECTION	ELECTION DATE Month Day Year <b>11 / 2 / 10</b>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <b>NONE</b>	13 OFFICE SOUGHT (if known) <b>Justice Peace P 1</b>	
14 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**

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <b>JOSEPH "JOEY" WILLIAMS</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>4/5/10</b>	5 Payee name <b>Waller County News Citizen</b>	
6 Amount (\$) <b>91.32</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>705 12th Street Hempstead TX 77445</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>advertising</b>	(b) Description (If travel outside of Texas, complete Schedule T)
Date <b>4/6/10</b>	Payee name <b>Hotline Press</b>	
Amount (\$) <b>107.25</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>1116 Austin St. Hempstead TX 77445</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>advertising</b>	Description (If travel outside of Texas, complete Schedule T)
Date <b>4/16/10</b>	Payee name <b>Waller County News Citizen</b>	
Amount (\$) <b>34.25</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>705 12th Street Hempstead TX 77445</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>advertising</b>	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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

15 C/OH NAME Joseph "Joey" Williams 16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

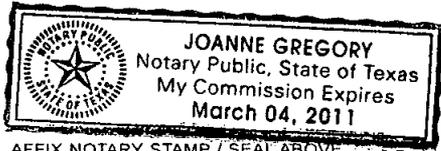
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

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	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 232.82
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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 5, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

[Signature]  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Joey Williams, this the 16 day of July, 20 10, to certify which, witness my hand and seal of office.

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