## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR FIRST MI		OFFICE USE ONLY		
NAME	MRS. BARBARA	SUFFIX	Date Received		
*	SARGEA				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	1905 15m OT	CITY; STATE; ZIP CODE	2016 JA		
Change of Address	Hemps	<b>三</b> 设			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (919) 826-0448	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amo \$		
TREASURER NAME	MR. FRANK	SUFFIX	Date Processed		
	KLUNF	9	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SL  22214 Kmiec Ri		ZIP CODE		
(Residence or Business)		HEMPSTEAD	17 19445		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (919) 826-3540	EXTENSION			
9 REPORT TYPE	January 15 30th day before el		15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 07 / 01 / 2015	THROUGH /2	Day Year / 2015		
11 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year Primary General	Runoff Other Description  Special	·		
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known)				
, in the second	LOU NITY TREASURER	1			
	TREAGURER				
GO TO PAGE 2					

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME	14 C/OH NAME 15 Filer ID (Ethics Commission Filers)				
BARBAR	A JOAA	1 SARGEAST			
16 NOTICE FROM POLITICAL COMMITTEE(S)	NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDE				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
			×1,		
	7. 117	COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
= *		/ ·			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ			
2		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0		
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS,	\$ ~		
	4. TOTAL	POLITICAL EXPENDITURES	\$ -		
CONTRIBUTION BALANCE	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 \$				
18 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.					
Notary Public, State of Texas My Commission Expires November 22, 2017  Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP / SEALABOVE					
Sworn to and subscribed before me, by the said Joan Sargert, this the 13th					
day of anuary, 20 16, to certify which, witness my hand and seal of office.					
Marelivery Hilany Avery Chief Deate					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					