

# 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:

<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR FIRST MI Joel A NICKNAME LAST SUFFIX Trimm JR	<b>OFFICE USE ONLY</b> Date Received <div style="text-align: center; font-weight: bold; font-size: 1.2em;">2016 JAN 13 PM 2:00</div> Date Hand-delivered or Date Postmarked
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<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5960 Whispering Lks Katy TX 77493
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<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION (281) 391-4064
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<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR FIRST MI Candice F NICKNAME LAST SUFFIX Trimm	Receipt # Amount \$ Date Processed Date Imaged
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<b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5960 Whispering Lks Katy TX 77493
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<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION (281) 391-4064
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<b>9 REPORT TYPE</b>	<input checked="" 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 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)
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<b>10 PERIOD COVERED</b>	Month Day Year    Month Day Year 7 / 14 / 15    THROUGH    1 / 13 / 15
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<b>11 ELECTION</b>	ELECTION DATE Month Day Year 11 / 8 / 16	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special
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<b>12 OFFICE</b> OFFICE HELD (if any) Constable Prec 4 Miller County	<b>13 OFFICE SOUGHT (if known)</b> Same
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GO TO PAGE 2

RECEIVED  
ELECTIONS

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 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

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION  
TOTALS

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

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 0

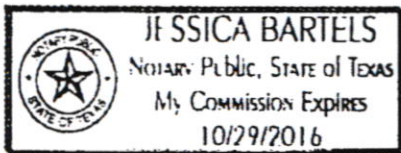
OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

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.



AFFIX NOTARY STAMP / SEAL ABOVE

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Joel Trimm, this the 13 day of JAN, 20 16, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Notary Public, Jessica Bartels  
Printed name of officer administering oath

Title of officer administering oath