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P.O. Box 12070

(512) 463-5800

1-800-325-8506

	NDIDATE / OFFICEHOLDER INANCE REPORT	FORM JC/OH Cover Sheet pg 1					
The JC/OH INSTRUCTIO	2 Total pages filed:						
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST MI	OFFICE USE ONLY					
NAME	NICKNAME LAST SUFFIX	Date Received					
	Charleston						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 21403 Briarnedon Nempsteed TX 77445	Date Hand-delivered or Date Postmarked					
Change of Address		5.16.07					
5 CANDIDATE/	AREA CODE PHONE NUMBER EXTENSION	1 198					
OFFICEHOLDER PHONE	(281) 830-5851	Receipt # Amount					
6 CAMPAIGN	MS / MRS / MR FIRST MI	Date Processed					
TREASURER NAME	Any L	Date Imaged					
	NICKNAME LAST SUFFIX						
	Charleston						
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE; 21403 Brizmedow Usingstead TX 77445	ZIP CODE					
8 CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION						
TREASURER PHONE	(281) $830 - 585)$						
9 REPORT TYPE	January 15 30th day before election Runoff	15th day after campaign treasurer appointment (officeholder only)					
	July 15 Bth day before election Exceeded \$500 limit	Final report (Attach C/OH - FR)					
10 PERIOD COVERED	Month Day Year Month Day THROUGH	Year					
11 ELECTION	ELECTION DATE ELECTION TYPE	······································					
	Month Day Year Primary Runoff	General Special					
12 OFFICE	OFFICE HELD (if any) Justice of the Prece # 3 13 OFFICE SOUGHT (if know	/n)					
14 NOTICE OF DIRECT CAMPAIGN	•• Direct campaign expenditures are campaign expenditures made by others without the car Candidates are required to disclose this information only if they receive notification of the dire						
EXPENDITURE BY OTHER INDIVIDUALS	Name						
	Address / PO Box; Apt. / Suite #, City; State; Zip Code						
_							
additional pages		•					
GO TO PAGE 2							
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Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

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JUDICIAL CA SUPPORT &		OFFICEHOLDER REPORT:	FORM JC/OH COVER SHEET PG 2				
15 C/OH NAME De Wayne E. Chaleston 16ACCOUNT # (Ethics Commission filers)							
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.						
	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS					
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM!					
	2. TOTAL (OTHER	\$ - 0 -					
EXPENDITURE TOTALS	3. TOTAL I	* - 0 -					
· · ·	4. TOTAL	POLITICAL EXPENDITURES	\$-0-				
CONTRIBUTION BALANCE	5. TOTAL F OF THE	ST DAY \$ - 0 -					
OUTSTANDING LOAN TOTALS	6. TOTAL I LAST D	рғтне \$- 0-					
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 15, Election Cord AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder Sworm to and subscribed before me, by the said DEWAYNE E. Char leston this the day of, zo, to certify which, witness my hand and seal of office. Build Dewayne Election Cord Signature of officer administering oath Title of officer administering oath							

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