

# 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 NAME  | MS / MRS <input checked="" type="checkbox"/> MR      FIRST      MI<br><i>Glenn</i> <i>R</i><br>NICKNAME      LAST      SUFFIX<br><i>White</i>   | <b>OFFICE USE ONLY</b>  |                      |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE<br><i>26727 Clark Road Waller, Tx 77484</i>  | Date Received<br><br>Date Hand-delivered or Date Postmarked<br><br>Receipt #      Amount \$<br>Date Processed<br>Date Imaged  |                      |
| 5 CANDIDATE / OFFICEHOLDER PHONE   | AREA CODE      PHONE NUMBER      EXTENSION<br><i>(281) 932-9217</i>   | 2015 JUN 29 AM 11:30<br>OFFICE  |                      |
| 6 CAMPAIGN TREASURER NAME  | MS / MRS / MR      FIRST      MI<br><i>Glenn</i> <i>R</i><br>NICKNAME      LAST      SUFFIX<br><i>White</i>   |   |                      |
| 7 CAMPAIGN TREASURER ADDRESS<br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE<br><i>26727 Clark Road Waller, Tx 77484</i>   |   |                      |
| 8 CAMPAIGN TREASURER PHONE   | AREA CODE      PHONE NUMBER      EXTENSION<br><i>(281) 932-9217</i>   |   |                      |
| 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)<br><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<br><i>01 / 01 / 2015</i> <i>06 / 30 / 2015</i>  |   |                      |
| 11 ELECTION  | ELECTION DATE<br>Month    Day    Year<br>/ /  | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description<br><input type="checkbox"/> General <input type="checkbox"/> Special |                      |
| 12 OFFICE  | OFFICE HELD (if any)<br><i>Constable Pet 2</i>  | 13 OFFICE SOUGHT (if known)   |                      |

**GO TO PAGE 2**

# 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  
 GENERAL  
 SPECIFIC

COMMITTEE NAME

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

\$ 450

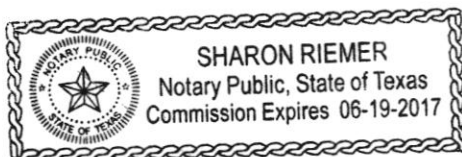
OUTSTANDING  
LOAN TOTALS

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

*Glenn R. White*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Glenn R White, this the 29 day of June, 2015, to certify which, witness my hand and seal of office.

*Sharon Riemer*  
Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath