## CANDIDATE/OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION THIS FORM.	אס Guide: explains how to complete   1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER	MS/MP5/MP FIRST MI CHARLES J.	OFFICE USE ONLY		
NAME	CHARLES J.	Oale Received		
	KARISCH			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS PROBOX ARTISUITE: CITY STATE ZIP-CODE  816 WILKINS HEMPSTEAD, TX 77445	Cote Hands (Milvered or Cate Poslmarked		
Change of Address		10/00		
5 CANDIDATE/ OFFICEHOLDER PHONE	PHONE NUMBER 54 EDSION 979 826-2478	Rêceiot ≠ Amauni		
6 CAMPAIGN TREASURER	MS / MES . (A) FIRST	Oate Processed  Date Imaged		
NAME	NCXIII:ME LAST SUFFIX HÄÄK	Dog mages		
7 CAMPAIGN TREASURER ADDRESS (Residence of business)	STREET ACCEPTES THO PO BOX PLEASEN. APT SUITE # STATE  816 WILKINS HEMPSTEAD, TX	zie coos 77445		
8 CAMPAIGN TREASURER PHONE	48E556E PHONE NUMBER EVFE:SION (979-4).			
9 REPORTIYEE	January /5 Join day before election Right 15th day after campaign freasurer appointment refreeholder only)			
	July (5. Sth day before election St., Exceéded S500 limit	Final fepón (Auach C/CH - FR)		
10 PERIOD COVERED	Monin Day Yaar Storth Day  O 1: 15 2006  0 2: 06	an we for the light in the first of the end of the		
11 ELECTIÓN	SEED TION DATE SEECTION TYPE Month Day Year			
12 OFFICE	0,000	General Special		
IIZ UPFILE	OFFICE HELD (1 any) 13 OFFICE SOUGHT (1 knów)	1		
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	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.			
BY OTHER INDIVIDUALS	Name			
☐ . addrtional pages	Address PC Sox. Apt./ Surie # City. State: Zip Cage			
	GO TO PAGE 2			

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

FORM C/OH COVER SHEET PG 2

74	C/OH NAME		·	15 ACCOUNT #(Ethics Commission filers)		
	HARLES J	. KARISCH				
16	SUPPORTING POLITICAL COMMITTEE(S)	This listing includes 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 NAME			
		COMMITTEE TYPE				
				·		
		GENERAL	COMMITTEE ADDRESS			
		-				
		SPECIFIC				
			COMMITTEE CAMPAIGN TREASURER NAME			
	additional pages		•	·		
	accinional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		•				
17	NO REPORTABLE ACTIVITY	Check here if r	to reportable activity occurred during this reporting period. (Sign affidavit be	low and submit pages 1 and 2 only.)		
18	CONTRIBUTION	1. TOTAL I	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN			
	TOTALS	PLEDG	S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	Ι Ψ		
		-		.00		
			POLITICAL CONTRIBUTIONS			
		(OTHER	THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ .00		
	EXPENDITURE	3. TOTAL I	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZ	· · · · · · · · · · · · · · · · · · ·		
	TOTALS	o. Torker	OLITIONE END ENDITORES OF 350 OR LESS. URLESS TIEMIZ	\$ .00		
		4. TOTAL POLITICAL EXPENDITURES \$				
		·		_00		
	OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THAY OF THE REPORTING PERIOD	HE \$		
				.00		
19	AFFIDAVIT					
	·Wi	ILLA LOEW	I swear or affirm under penalty of	perjury, that the accompanying report		
		CARY PUBL	<b>%</b>	information required to be reported by		
	7		me under Title 15, Election Code.			
			is true and correct and includes all me under Title 15, Election Code.			
·		, o, 1		- 1/		
		to TEOFTE N	Clama lea	fame.		
	***	WINTES: 10-2	Signature of Cano	didate or Officeholder		
		SAMMARIAN				
	AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said MW165 J KAYISCH, this the 6th day						
20 (c), to certify which, witness my hand and seal of office.						
	GULLANDING LEID IDEWE ELECTION ADMIN					
-	Signature of officer ad	lministering oath	Printed name of officer administering oath T	itle of officer administering oath		