CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form. 1 ACCOUNT # (Ethica Commence filers) 2 Total pages filed: 3 CANDIDATE / OFFICENOLDER NAME 4 CANDIDATE / OFFICENOLDER NAME 4 CANDIDATE / OFFICENOLDER NAME 4 CANDIDATE / OFFICENOLDER NAME 5 CAMPAIGN TREASURER NAME 6 CAMPAIGN TREASURER NAME 7 CAMPAIGN TREASURER ADDRESS (INDROBOX PLANS) 6 CAMPAIGN TREASURER NAME 7 CAMPAIGN TREASURER PHONE 7 CAMPAIGN TREASURER PHONE 8 REPORTTYPE 9 PERIOD ON API SUPER SINCE SIN						
ACANDIDATE / OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE: ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE: ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE: ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE: ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE: ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: SUITE # CITY: STATE / ZP CODE OFFICEHOLDER ADDRESS /FD 800; AFT / SUITE # CITY: SUITE # CI						
A CANDIDATE! OFFICEHOLDER ADDRESS Champe of Address Champe of Address Champe of Address Champe of Address TITLE TREST NOCIAME TITLE TREST NOCIAME THOMAS CAMPAIGN TREASURER NAME CAMPAIGN TREASURER TO BOX 185 WALLER TX 77484 THOMAS THOMAS THOMAS CAMPAIGN TREASURER TO BOX 185 WALLER TX 77484 TREASURER PHONE TREASURER TX 77484 TREASURER T	OFFICEHOLDER	OFFICE USE ONLY				
OFFICEHOLDER ADDRESS Change of Address Change of Address TITLE SIRST NAME TREASURER NAME TO BOY NONAME THOMAS STREET ADDRESS (NO PO BOX PLEASE): APT (SUTE #: OTY: STATE: ZIP CODE TREASURER ADDRESS (Raidence or business) Receipt # Amount Date Processed Date Imaged THOMAS THE ADDRESS (Raidence or business) THOMAS STREET ADDRESS (NO PO BOX PLEASE): APT (SUTE #: OTY: STATE: ZIP CODE TREASURER ADDRESS (Raidence or business) THOMAS TREASURER PHONE ABA CODE PHONE NUMBER EXTENSION TREASURER PHONE ABA CODE PHONE NUMBER EXTENSION TREASURER PHONE ABA ODE PHONE NUMBER EXTENSION TRADIOF TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer and active in the direct campaign expenditure. In the direct campai	. 47 11712	NICKNAME LAST SUFFIX				
OFFICEHOLDER ADDRESS Change of Address Change of Address TITLE SIRST NAME TREASURER NAME TO BOY NONAME THOMAS STREET ADDRESS (NO PO BOX PLEASE): APT (SUTE #: OTY: STATE: ZIP CODE TREASURER ADDRESS (Raidence or business) Receipt # Amount Date Processed Date Imaged THOMAS THE ADDRESS (Raidence or business) THOMAS STREET ADDRESS (NO PO BOX PLEASE): APT (SUTE #: OTY: STATE: ZIP CODE TREASURER ADDRESS (Raidence or business) THOMAS TREASURER PHONE ABA CODE PHONE NUMBER EXTENSION TREASURER PHONE ABA CODE PHONE NUMBER EXTENSION TREASURER PHONE ABA ODE PHONE NUMBER EXTENSION TRADIOF TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer appointment (difficationable or only) TO SUBMIT (Manuary 1 of 15h day after campaign insaturer and active in the direct campaign expenditure. In the direct campai		RALSTON A.W.				
Change of Address WALLER TX 77484 Pint Hards-delivered of Other Pestman and Other Postman and Other Processes Support	OFFICEHOLDER	POBOX				
TREASURER NAME NICKNAME		WALLER TX 77484 Date Hard-delivered on Date Postmarked				
THOMAS This imaged	TREASURER	TOY				
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY; STATE; ZIP CODE TREASURER ADDRESS (Rasidance or business) WALLER TX 77484 7 CAMPAIGN TREASURER PHONE 936) 372-3777 8 REPORT TYPE January 15 John day before election Exceeded \$500 limit Final report (Attach COH - FR) 9 PERIOD COVERED Month Day Year OI \$5 \ o 3 THROUGH O1 15th day after campaign treasurer appointment (officientober only) THROUGH O1 5 \ o 3 THROUGH O1 5 \ o 3 THROUGH O1 5 \ o 3 10 ELECTION ELECTION DATE Month Day Year Primary Runoff General Special 11 OFFICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS Address / PO Box: Apt. / Suite #: City: State: Zip Code		NICKNAME LAST SUFFIX Date Processed				
TREASURER ADDRESS (Rosidance or business) TREASURER ADDRESS (Rosidance or business) TREASURER TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE January 15 Join day before election Exceeded \$500 limit Final report (Attach COH - FR) PRIOD COVERED Month Day Your THROUGH THROUGH THROUGH TOFFICE OFFICE OFFICE OFFICE HELD (if any) OFFICE TOFFICE OFFICE Addidates are required to disclose this information only if they receive notification of the direct campaign expenditure. Address I PO Box: Apt. / Suite #; City: State: Zip Code		THOMAS Date Imaged				
TREASURER ADDRESS (Residence or business) WALLER TX 77484 7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE BARD 372-3777 8 REPORT TYPE January 15 January 15 January 15 Bith day before election Exceeded \$500 limit Final report (Attach COH - FR) PRIOD COVERED Month Day Year THROUGH THROUGH THROUGH OT 15/03 10 ELECTION ELECTION TYPE Month Day Year OPPICE HELD (if any) CONTY JUGGE TO DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS Address / PO Box: Apt. / Suite 9: City: State: Zip Code	6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION 9 REPORT TYPE January 15 John day before election Runoff phone in the direct campaign treasurer appointment (officeholder only) 9 PERIOD ON PART THROUGH ON PROPERTY ON THROUGH Phone Pecial Promary Runoff General Special 10 ELECTION DATE Day Year Phone	TREASURER ADDRESS					
TREASURER PHONE 36) 372-3177 REPORT TYPE	(Residence of business)	WALLER TX 77484				
B REPORTTYPE		AREA CODE PHONE NUMBER EXTENSION				
January 15 39th day before election Exceeded \$500 limit Final report (Artach COH - FR)		P136)372-3777				
9 PERIOD COVERED 10 ELECTION ELECTION DATE Month Day Year THROUGH OT 15 / 03 11 OFFICE OFFICE HELD (if any) OFFICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS OFFICE Address / PO Box; Apl. / Suite #; City: State: Zip Code Address / PO Box; Apl. / Suite #; City: State: Zip Code	8 REPORT TYPE					
THROUGH O1						
Month Day Year Primary Runoff General Special 11 OFFICE OFFICE HELD (if any) TOPFICE OFFICE SOUGHT (if known) 12 OFFICE SOUGHT (if known) 13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS Namo Address / PO Box: Apt. / Suite #; City: State: Zip Code		THEOLICH				
Primary Runoff Goneral Special	10 ELECTION					
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS 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. " Namo Address / PO Box: Apt. / Suite #: City: State: Zip Code						
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS 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. Namo Address / PO Box: Apt. / Suite #: City: State: Zip Code	11 OFFICE					
OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS Direct campaign expenditures are campaign expenditures made by others without the candidate's pirit consent or approve. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Namo Address / PO Box: Apt. / Suite #: City: State: Zip Code	!	LOUNTY JURGE				
BY OTHER INDIVIDUALS Address / PO Box: Apt. / Suite #; City: State: Zip Code additional pages	OF DIRECT	Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval.				
Address / PO Box: Apt. / Suite #: City: State: Zip Code	1	Namo				
additional pages		R				
		Address / PO Box; Apt. / Suite #; City: State; Zip Code				
GO TO PAGE 2	additional pages					
		GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

			15 ACCOUNT #(Ethics Commission filers)		
OWEN RALSTON					
16 NOTICE FROM POLITICAL	•• This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditure may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to this information only if they receive notice of such expenditures.				
COMMITTEE(S)	COMMITTEE TYPE	E TYPE COMMITTEE NAME			
`. 	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 NO REPORTABLE ACTIVITY	Check here if	no reportable activity occurred during this reporting period. (Sign affidavit bet	low and submit pages 1 and 2 only.)		
18 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$				
	2. TOTAL (OTHER	\$			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED				
	4. TOTAL	\$			
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
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 Code. JOANNE GREGORY NOTARY PUBLIC STATE OF TEXAS My Commission Expires 03-04-2007 Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said <u>OWEN STON</u> , this the <u>IT</u> day of the said of office.					
Signalure of officer administering oath Printed name of officer administering dath Title of officer administering oath					