(512)463-5800

1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

		L ASSOCIATE	5 Takal managa filladi:	
The C/OH Instruction this form.	Guide explains how to complete	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST ELLEN NICKNAME LAST SHELBURNE	MI CONTRERAS SUFFIX	OFFICE USE ONLY Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #; CO POBOX 1085 HEMPSTI	EAD TX 77445 EXTENSION	Dale Hand-delivered or Date Postmarked 7.12.05	
PHONE 6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MR. ROBERT NICKNAME LAST SHELBURNE	MI DUNN Suffix	Receipt # Amount Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL P O BOX 1085		ZIP CODE 77445	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (979) 826-3467	EXTENSION		
9 REPORT TYPE	January 15 30th day before election July 15 8th day before election Month Day Year	Exceeded \$500 limit Month Day	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR) Year	
COVERED	1	ough June/30	12005	
11 ELECTION	Month Day Year Primal	ry Runoff	General Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (If know	wn)	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures are campaign expenditures are campaign expenditures are campaign expenditures. Name Address / PO Box; Apt / Sulta #; City; State;	penditures made by others without the ca n only if they receive notification of the dir Zip Code	ndidate's prior consent or approval. ect campaign expenditure. ••	
additional pages				
GO TO PAGE 2				

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

FORM C/OH COVER SHEET PG 2

16 C/OH NAME	16A0	CCOUNT # (Ethics Commission filers)	
10 O/O/I TAPAME			
17 NOTICE FROM POLITICAL	•• 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(S)	COMMITTEE TYPE COMMITTEE NAME		
	GENERAL COMMITTEE ADDRESS		
	SPECIFIC		
additional pages	COMMITTEE CAMPAIGN TREASURER NAME	,	
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
19 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
·	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	
	4. TOTAL POLITICAL EXPENDITURES	\$	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	
OUTSTANDING LOAN TOTALS	6. 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 perjuis true and correct and includes all informmentary Public, State of Texas MY COMMISSION EXPIRES JAN. 15, 2006 MP / SEAL ABOVE	mation required to be reported by	
1		this the day	
of July, 20 05, to certify which, witness my hand and seal of office.			
Maked Signature of officer a	Jonesak Marcy Tomczak Idministering oath Printed name of officer administering oath Title of	of officer administering oath	