Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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CANDIDĂT CAMPAIGI	FORM C/OH Cover Sheet pg 1			
The C/OH Instruction Guide explains how to complete this form. 1 ACCOUNT # (Ethics Commission Filers)		2 Total pages filed:		
3 CANDIDATE/	MS / MR FIRST MI	OFFICE USE ONLY		
OFFICEHOLDER NAME	ELLEN CONTRERAS	Date Received		
	NICKNAME LAST SUFFIX			
	SHELBURNE			
4 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
OFFICEHOLDER MAILING	P O BOX 1085 HEMPSTEAD TX 77445			
ADDRESS	I O BOX 1005 NEMI STERD IX 77445	Date Hand-delivered or Date Postmarked		
Change of Address				
5 CANDIDATE/	AREA CODE PHONE NUMBER EXTENSION	Receipt # Amount w		
OFFICEHOLDER PHONE	(979) 826-3467	Date Processed		
6 CAMPAIGN	MS/MRS/MR FIRST MI			
TREASURER NAME	MR. ROBERT DUNN	Date Imaged		
	NICKNAME LAST SUFFIX	· ·		
	SHELBURNE			
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE		
TREASURER ADDRESS (Residence or Business)	P O BOX 1085 HEMPSTEAD TX	77445		
8 CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION			
TREASURER PHONE	(979) 826-3467			
9 REPORT TYPE	January 15 2 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 D	ay Year		
11 ELECTION	ELECTION DATE ELECTION TYPE			
	Month Day Year Primary Runoff [General Special		
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if k	nown)		
14 NOTICE OF DIRECT CAMPAIGN	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.			
EXPENDITURE BY OTHER INDIVIDUALS	Name			
	Address / PO Box; Apt. / Suite #; City; State; Zip Code			
additional pages				
GO TO PAGE 2				

Revised 04/21/2010

1-800-325-8506

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME 16 ACCOUNT # (Ethics Commission Filers)				
ELLEN CONTRERAS SHELBURNE			16 ACCOUNT # (Ethics Commission Filers)	
17 NOTICE FROM POLITICAL	THIS BOX IS FOR NOT CANDIDATE / OFFICE	RNE ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES M HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CAN ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY I	NDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS	······	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
18 CONTRIBUTION TOTALS	1. 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	TURE 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 4. TOTAL POLITICAL EXPENDITURES \$		AIZED \$	
			\$	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		DAY \$	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			

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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 Title 15, Election Code. me u

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Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ellen Contreras Shelburne ____, this the

day of <u>June</u>, 20 <u>11</u>, to certify which, witness my hand and seal of office.

ara L Schovaj sa 1) Taru Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath