


FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #		2 Total pages filed: <u>4</u>		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>(MR)</u>	FIRST <u>Odis</u>	MI	Date Received		
	NICKNAME	LAST <u>Styers</u>	SUFFIX <u>III</u>	2012 JAN 12 PM 3:24 FILED WALLER COUNTY CLERK ELECTIONS DIVISION		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)			
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit				
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)				
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report				
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	<u>1</u>	<u>1</u>	<u>2011</u>	THROUGH	<u>6</u>	<u>30</u>
6 EXPLANATION OF CORRECTION						
<p>Mis understood what information was requested. Listed total contributions received instead of bank balance. (p. 2 line 5) The correct amount should be \$5,318.08</p>						
7 AFFIDAVIT						
<p>I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.</p> <p>Check ONLY if applicable:</p> <p><input type="checkbox"/> Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.</p> <p><input checked="" type="checkbox"/> Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.</p>						
		<p><u>[Signature]</u> Signature of Candidate or Officeholder</p>				
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said <u>Odis Styers III</u> , this the <u>12</u> day of <u>January</u> , 20 <u>12</u> , to certify which, witness my hand and seal of office.						
<u>Shelly Lane</u> Signature of officer administering oath		<u>Shelly Lane</u> Printed name of officer administering oath		<u>Notary</u> Title of officer administering oath		
<p>Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections</p>						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME Odis Styers III 15 ACCOUNT # (Ethics Commission Filers)

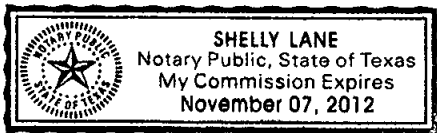
16 NOTICE FROM POLITICAL COMMITTEE(S)

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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 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 TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 5,318.08
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Odis Styers III, this the 12 day of January, 2012, to certify which, witness my hand and seal of office.

Shelly Lane Signature of officer administering oath
Shelly Lane Printed name of officer administering oath
Notary Title of officer administering oath

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

COPY

**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:

2

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: *MR.* FIRST: *DDIS* MI: _____
NICKNAME: _____ LAST: *STYERS* SUFFIX: *III*

OFFICE USE ONLY

Date Received

2011 JUL 15 PM 2:01

FILED
WALTER COUNTY CLERK
ELECTIONS DIVISION

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
PO BOX 557 Hempstead TX 77445

Date Hand-delivered or Postmarked

Receipt #

Amount

change of address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE: *(936)* PHONE NUMBER: *870-5112* EXTENSION: _____

Date Processed

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: *MRS.* FIRST: *SUSAN* MI: _____
NICKNAME: _____ LAST: *STYERS* SUFFIX: _____

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
*PO BOX 557
37484 FM 1736 Hempstead TX 77445*

8 CAMPAIGN TREASURER PHONE

AREA CODE: *(979)* PHONE NUMBER: *826-6791* EXTENSION: _____

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
1 / 1 / 2011 THROUGH 6 / 30 / 2011

11 ELECTION

ELECTION DATE: Month Day Year ELECTION TYPE:
 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)
Walter Co. Commissioner Peter

13 OFFICE SOUGHT (if known)

14 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.

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

Odin Styers III

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

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 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

\$ *11,925.00* ~~xx~~

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ *8,799.33* ~~xx~~

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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Odin Styers III*, this the *14th* day of *July*, 20 *11*, to certify which, witness my hand and seal of office.

Shelly Lane
Signature of officer administering oath

Shelly Lane
Printed name of officer administering oath

NOTARY
Title of officer administering oath