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# (Ethics Commission filers) 2 Total pages filed:						
3 CANDIDATE / OFFICEHOLDER	Constable Pct. 4 Joel Albert OFFICE USE ONLY					
NAME:	NICKNAME LAST SUFFIX					
	Trimm, Jr. 1000					
4 CANDIDATE / OFFICEHOLDER ADDRESS	Trimm, Jr. ADDRESS / PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE P.O. Box 896 Brookshire, TX 77423					
Change of Address	Date Hand-delivered or Date Postmarked					
5 CAMPAIGN	TITLE FIRST MI					
TREASURER NAME	Candice Furman Receipt # Amount					
	NICKNAME LAST SUFFIX Date Processed					
	Trimm Date Imaged					
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE; ZIP CODE					
ADDRESS (Residence or business)	314 Hereford Brookshire, TX 77423					
7 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER EXTENSION					
PHONE	(281 -) 375-6912					
8 REPORTTYPE	X 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)					
9 PERIOD COVERED	Month Day Year Month Day Year 12 / 01 / 99 THROUGH 01 / 15 / 00					
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year					
·	11 / 7 / OO Primary Runoff X General Special					
11 OFFICE	OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)					
	Constable Constable					
13 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					
	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

14 C/OH NAME 15				15 ACCOUNT #(Ethics Commission filers)		
		1 A. Trimm,	Jr.			
P	UPPORTING OLITICAL OMMITTEE(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 TYPE	COMMITTEE NAME			
		GENERAL SPECIFIC	i			
		o	COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>		
	additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
	O REPORTABLE CTIVITY	Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)				
	ONTRIBUTION OTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$		
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUA			POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
	XPENDITURE OTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$				
		4. TOTAL	\$			
	UTSTANDING DAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
10 A	FFIDAVIT					
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. BARBARA E LUENÇAS NOTARY PUBLIC						
State of Texas Comm. Exp. 07-27-2002 Signature of Candidate or Officeholder						
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said <u>Joel A. Trimm, Jr.</u> , this the <u>15th</u> day						
of <u>January</u> , 20 <u>00</u> , to certify which, witness my hand and seal of office.						
1	Sarbaral	hye		otary Public		
<u> </u>	ignature of officer ad	ninistering oath	Printed name of officer administering oath Tr	tle of officer administering oath		