Texas Ethics Commission

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(512) 463-5800 1-800-325-8506

	TE / OFFICEHOLDER N FINANCE REPORT	FORM C/OH COVER SHEET PG 1
The C/OH Instruction G	uide explains how to complete this form. 1 ACCOUNT# (Ethics Commission	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MR JUCI ALB NICKNAME LAST Trimm	MI OFFICE USE ONLY Date Received
CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		ZIP CODE 2493 Date Hand-delivered or Date Postmärked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt # Amount Date Processed
6 CAMPAIGN TREASURER NAME		MI Date Imaged
CAMPAIGN TREASURER ADDRESS (Residence or business) CAMPAIGN TREASURER		STATE: ZIP CODE TX 79193
PHONE REPORT TYPE	() 8)       39/       4064         January 15       30th day before election       Runoff         July 15       8th day before election       Exceeded \$	15th day after campaign treasurer appointment (officeholder only)     Final report (Attach C/OH - FR)
0 PERIOD COVERED	Month Day Year Month	
1 ELECTION	ELECTION DATE     ELECTION TYPE       Month     Day     Year       II     / O')     Primary     Runoff	General Special
2 OFFICE	OFFICE HELD (if any) 13 OFFICE SO	UGHT (if known)
4 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures made by of Candidates are required to disclose this information only if they receive Name	thers without the candidate's prior consent or approva notification of the direct campaign expenditure. ••
additional pages	Address / PO Box; Apt. / Suite #; City; State; Zip Code	
	GO TO PAGE 2	

	Texas Ethics Commis	ssion P.O. Box	12070	Austin, Texas	78711-2070	(512) 46	3-5800	1-800-325-	
,	CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS					C	FORM C/O		
	15 C/OH NAME				<u> </u>	16 /	ACCOUNT #	# (Ethics Commissio	
	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 represent this information only if they receive notice of such expenditures.							
	COMMITTEE(S)			NAME				N	
		GENERAL		ADDRESS					
•								<b>⊤</b> <u>–</u> ,	
	additional pages			CAMPAIGN TREASURER N	AME				
			COMMITTEE (	CAMPAIGN TREASURER A	DDRESS				
	18 CONTRIBUTION TOTALS			ONTRIBUTIONS OF OR GUARANTEES OF			\$	0	
				L CONTRIBUTION GES, LOANS, OR GL	-	ANS)	\$	0	
	EXPENDITURE TOTALS	3. TOTAL PO	LITICALE	XPENDITURES OF \$	50 OR LESS, UNLE	SS ITEMIZED	\$	0	
		4. TOTAL P	OLITICA	L EXPENDITURES			\$	<u> </u>	
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD				\$	6		
	OUTSTANDING LOAN TOTALS			MOUNT OF ALL OUT	STANDING LOAN	S AS OF THE	\$	0	
	19 AFFIDAVIT		·	is true	r, or affirm, under and correct and in der Title 15, Electio	cludes all inforr			
				-4		re of Candidate	e or Officeho	lder	
	AFFIX NOTARY STAMP			0			_	th	
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