

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:

6

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
 MR. CHRISTOPHER M.
 NICKNAME LAST SUFFIX

CHRIS JETT

OFFICE USE ONLY

Date Received

2008 FEB 25 PM 1:20
 FILED
 JARRET JARRET
 COUNTY CLERK
 BURNET COUNTY, TEXAS

Date Hand delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE

903 HILL GROVE WEST, GRANITE SHOALS, TX 78654

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

(830) 598-5400

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
 MR. GEORGE H.
 NICKNAME LAST SUFFIX

BUTCH KEMPER

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY, STATE, ZIP CODE

200 GATEWAY NORTH MARBLE FALLS, TX 78654

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(830) 693-0454

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
 01 / 25 / 2008 THROUGH 02 / 23 / 2008

11 ELECTION

ELECTION DATE ELECTION TYPE
 Month Day Year
 03 / 04 / 2008 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

BURNET COUNTY CONSTABLE DISTRICT 4

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

CHRISTOPHER M. JETT

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

\$ 15⁰⁰

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 515⁰⁰

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 3⁹⁴

4. TOTAL POLITICAL EXPENDITURES

\$ 2,443⁸⁴

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

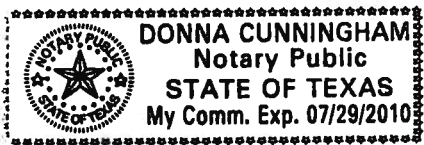
\$ 0

OUTSTANDING LOAN TOTALS

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

\$ 2070⁴⁴

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 75, Election Code.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Christopher Jett, this the 25th day of February, 20 08, to certify which, witness my hand and seal of office.

Donna Cunningham Donna Cunningham Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
2

2 FILER NAME CHRISTOPHER M. JETT 3 ACCOUNT # (Ethics Commission filers)

4 Date <u>1/30/2008</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>KEVIN CROSKREY</u>	7 Amount of contribution (\$) <u>\$100.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>1519 QUIET TRAIL SUGAR LAND, TX 77479</u>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date <u>2/6/2008</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>RUTH A. GELCHRIST</u>	Amount of contribution (\$) <u>\$50.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>1507 LEE WAY DRIVE GRANITE SHOALS, TX 78654</u>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date <u>2/8/2008</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>LAURA JETT KRANTZ</u>	Amount of contribution (\$) <u>\$100.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>113 SPRING VALLEY RUN BULLARD, TX 75757</u>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date <u>2/9/2008</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>LEE J. PARMETER</u>	Amount of contribution (\$) <u>\$50.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>308 STEWART MARBLE FALLS, TX 78654</u>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date <u>2/13/2008</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>MARILYN RUTH GOODLOB</u>	Amount of contribution (\$) <u>\$100.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>621 COLUMBIA CT. COLORADO SPRINGS, CO 80904</u>		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
2

2 FILER NAME CHRISTOPHER M. JETT 3 ACCOUNT # (Ethics Commission filers)

4 Date <u>2/18/2008</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>STEVE L. NASH</u>	7 Amount of contribution (\$) <u>\$100.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>P.O. Box 181 MARBLE FALLS, TX 78654</u>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
1

2 FILER NAME **CHRISTOPHER M. JETT** 3 ACCOUNT # (Ethics Commission filers)

4 Date 2/1/2008	5 Payee name ACE PRINTING, INC.	7 Amount (\$) \$464.00
6 Payee address; City; State; Zip Code 3360 S. 1500 W. OGDEN, UT 84401		

8 Purpose of payment (See instructions regarding type of information required.) PRINTING CAMPAIGN LITERATURE (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/11/2008	Payee name DIRT CHEAP SIGNS	Amount (\$) \$265.21
Payee address; City; State; Zip Code 1102 S. INDUSTRIAL BLVD., SUITE F ROUND ROCK, TX 78681		

Purpose of payment (See instructions regarding type of information required.) CAMPAIGN YARD SIGNS (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1

2 FILER NAME

CHRISTOPHER M. JETT

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/7/2008

5 Payee name

VICTORY PUBLISHING

6 Payee address; City; State; Zip Code

1007 AVE K.
MARBLE FALLS, TX 78654

7 Purpose of expenditure (See instructions regarding type of information required.)

NEWSPAPER ADVERTISING
(If travel outside of Texas, complete Schedule T)

8 Amount (\$)

\$ 687⁶³

Reimbursement from political contributions intended

Date

2/12/2008

Payee name

THE HIGHLANDER

Payee address; City; State; Zip Code

304 GATEWAY LP.
MARBLE FALLS, TX 78654

Purpose of expenditure (See instructions regarding type of information required.)

NEWSPAPER ADVERTISING
(If travel outside of Texas, complete Schedule T)

Amount (\$)

\$ 576⁰⁰

Reimbursement from political contributions intended

Date

2/22/2008

Payee name

VICTORY PUBLISHING

Payee address; City; State; Zip Code

1007 AVE K.
MARBLE FALLS, TX 78654

Purpose of expenditure (See instructions regarding type of information required.)

NEWSPAPER INSERTS
(If travel outside of Texas, complete Schedule T)

Amount (\$)

\$ 87⁰⁰

Reimbursement from political contributions intended

Date

2/16/2008

Payee name

UNITED STATES POSTAL SERVICE

Payee address; City; State; Zip Code

1212 HWY 281 N.
MARBLE FALLS, TX 78654

Purpose of expenditure (See instructions regarding type of information required.)

POSTAGE
(If travel outside of Texas, complete Schedule T)

Amount (\$)

\$ 364⁰⁰

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

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