CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI	OFFICE USE ONLY		
IVAME	NICKNAME LAST SUFFIX	Date Received		
	Chownover	RECEIVED		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	JAN 17 2017		
Change of Address	106 CR 144. MF TV 78654	Burnet Co Elections		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (\$30 613 -0156	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST MI	Receipt # Amount \$		
NAME	NICKNAME LAST SUFFIX	Date Processed		
	Chiwnover	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY: STATE;	ZIP CODE		
(Residence or Business)	124 62 11/4/ 122 22 - 1	T Omed		
	104 CR 144. Mariou Falls	16 18634		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (830) 613-0156			
9 REPORT TYPE	January 15 30th day before election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15 Sth day before election Exceeded \$500 limit	Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month	Day Year		
	7 / 1 / 2014 THROUGH 12/	35/2017		
11 ELECTION	ELECTION DATE ELECTION TYPE			
	Month Day Year Primary Runoff Other Description General Special			
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known			
- 011102	The street south (I known	,		
	h- , —			
County reasurer				
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CAND	OR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE INDITURES.			
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	* O		
EXPENDITURE TOTALS	3. TOTAL I	\$			
	4. TOTAL	POLITICAL EXPENDITURES	\$ D		
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD				
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. STATE OF TEXAS					
ID#13011030-6 My Comm. Exp. Feb. 9, 2019 Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP/SEALABOVE					
Sworn to and subscribed before me, by the said NWTC COWNOLEV , this the, this the					
Channal Sillespie Shanna Gillespie Notory Public					
Signature of officer administering oath Printed name of officer administering oath Title of office administering oath					