

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 NAME

MS / MRS / MR **MR.** FIRST **JOE DON** MI
NICKNAME LAST **DOCKERY** SUFFIX

OFFICE USE ONLY

Date Received

2011 JAN 10 AM 11:48
FILED
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
**3726 EAST F.M. 2147
MARBLE FALLS, TX 78054**

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 755-9898

6 CAMPAIGN TREASURER NAME

MS / MRS / MR **MRS.** FIRST **MIDGE** MI
NICKNAME LAST **DOCKERY** SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
3726 EAST F.M. 2147, MARBLE FALLS, TX 78054

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 755-4555

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
10 / 24 / 10 THROUGH 12 31 10

11 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE
 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

COUNTY COMMISSIONER, PRECINCT 4

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

N/A

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 JOE DON DOCKERY 16 ACCOUNT # (Ethics Commission Filers)

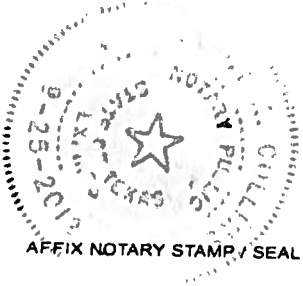
17 NOTICE FROM POLITICAL COMMITTEE(S)

** 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. **

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME
	<u>N/A</u>
	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	\$ - 0 -
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ - 0 -
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ - 0 -
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,677 ⁷⁴
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -

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.

Joe Don Dockery
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Joe Don Dockery, this the 10th day of January, 20 11, to certify which, witness my hand and seal of office.

Nancy K. Collins Nancy K. Collins Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath