	ATE / OFFICEHOLDER SN FINANCE REPORT	FORM C/OH COVER SHEET PG 1
	Guide explains how to complete this form. 1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	NICKNAME LAST SUFFIX	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX APT / SUITE #. CITY: STATE; ZIP CODE 609 LAKEWAY BURNET TX 7841	Date Hand-dayrered or Data Postmak d
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (5/2) 756-1750	Receipt # 5 Almont
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI SHERI NICKNAME LAST SUFFIX	Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY, STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 756-1750	
9 REPORTTYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month D. O. 7 / 16 / 2008 THROUGH 01 / 2	lay Year
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff	General Special
12 OFFICE	OFFICE HELD (If any) 13 OFFICE SOUGHT (If kn)	own)
I4 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures made by others witho Candidates are required to disclose this information only if they receive notification Name	ut the candidate's prior consent or approval. of the direct campaign expenditure.
additional pages	Address / PO Box; Apl. / Suite #. City: Slale; Zip Code	
	GO TO PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM C/OH

			COVER SHEET PG 2
15 C/OH NAME	SHERI FR	RAZIER	16 ACCOUNT # (Ethics Commission File
17 NOTICE FROM POLITICAL COMMITTEE(S)	The second second	notice of political contributions accepted or political expenditures made be ider. These expenditures may have been made without the candidate's of ceholders are required to report this information only if they receive noti	officeholderie impude des en en est
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL SPECIFIC	COMMITTEE ADDRESS	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS	1. TOTAL PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZE	\$ - 0 -
	4. TOTAL	POLITICAL EXPENDITURES	\$ _0-
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ _O-
OUTSTANDING LOAN TOTALS	6. TOTAL PI LAST DA	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$ -0-
		I swear, or affirm, under penalty of perist true and correct and includes all informe under Title 15, Election Code. Signature of Candidates and SHERI FRAZIER.	ate or Officeholder
of January, 20	20	fy which, witness my hand and seal of office.	this the day
Signature of officer adm	inistering oath	Printed name of officer administering oath Title	of officer administering oath