CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT  The C/OH Instruction Guide explains how to complete  1 ACCOUNT® (Enter Commission flarr)  2 Total pages field:  The C/OH Instruction Guide explains how to complete  1 ACCOUNT® (Enter Commission flarr)  2 Total pages field:  The C/OH Instruction Guide explains how to complete  1 ACCOUNT® (Enter Commission flarr)  2 Total pages field:  The C/OH Instruction Guide explains how to complete  1 ACCOUNT® (Enter Commission flarr)  2 Total pages field:  1 ACCOUNT® (Enter Commission flarr)  2 Total pages field:  1 ACCOUNT® (Enter Commission flarr)  2 Total pages field:  1 ACCOUNT® (Enter Commission flarr)  2 Total pages field:  2 Total pages field:  2 Total pages field:  3 CANDIDATE / OFFICE USE ONLY  Des Received  ACCOUNT®  AC	Texas Ethics Commission	n P.O. Box 12070 Austin, Texas 78	3711-2070	(512) 463-5800	1-800-325-85
THE FORM.  3 CANDIDATE/ OFFICEHOLDER NAME  4 CANDIDATE/ OFFICEHOLDER NAME  5 CANDIDATE/ OFFICEHOLDER ADDRESS   POSOX; APT / SUITE R.  Change of Address Change of Address  5 CANDIDATE/ OFFICEHOLDER ANAL CODE Change of Address  6 CANDIDATE/ OFFICEHOLDER NOCKANE  6 CANDIDATE/ OFFICEHOLDER NOCKANE  7 CAMPAIGN TREASURER ADDRESS IN POSOX PHONE NUMBER NOCKANE  1 STREET ADDRESS IN POSOX PLASE; APT / SUITE R.  STREET ADDRESS IN POSOX PLASE; APT / SUITE R.  TRASSURER ADDRESS (Readdres or business)  8 CAMPAIGN TREASURER PHONE  9 REPORT TYPE  1 July 15 Sh day before election DELECTION TYPE  1 July 15 Sh day before election DELECTION TYPE  1 July 15 Sh day before election DELECTION TYPE  1 July 15 Sh day before election DELECTION TYPE  1 ARL CODE DELECTION TYPE DELECTION TYPE  AND OFFICE USE ONLY Date Processed Date Para-deleved and position of the direct campaign treasurer esponsional (officenciade cry) Primary Record of the primary Record of the primary Record of the primary Delection of the direct campaign sependiture.  AND OFFICE USE ONLY Date Para-deleved and position of the direct campaign sependiture.  TRASSION TRASS					
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S CAMPAIGN TREASURER NAME  **NAME**	OFFICEHOLDER			Receipt # Ar	· vo
TREASURER ADDRESS (Residence or business)  8 CAMPAIGN TREASURER PHONE  9 REPORT TYPE  January 15  July 15  Sth day before election  Runoff  Exceeded \$500 limit  Final report (Attach COH - FR)  10 PERIOD COVERED  Month Day Year  O1 / 16 / 2005  THROUGH  12 OFFICE  OFFICE HELD (if any)  TAX ASSESS DR  Name  Name  Name  Name  Name  Name  PHONE NUMBER EXTENSION  Runoff  Extension  Runoff  Extension  Runoff  Section  Runoff  Section  Runoff  Month Day Year O1 / 15 / 2005  15 OFFICE SOUGHT (if known)  Name  Name	TREASURER	NICKNAME LAST		Date Processed	- 60
TREASURER PHONE  9 REPORT TYPE  January 15  Solth day before election  Runoff  15th day after campaign treasurer appointment (officeholder cnity)  July 15  8th day before election  Exceeded \$500 limit  Final report (Attach C/OH - FR)  10 PERIOD  COVERED  Month  Day  Year  OT  15 / 2005  11 ELECTION  ELECTION DATE  Day  Year  Primary  Runoff  General  Special  12 OFFICE  OFFICE HELD (if any)  TAX  ASSESS DR  14 NOTICE  OF DIRECT  CAMPAIGN  EXCENDITURE  BY OTHER  INDIVIDUALS	TREASURER ADDRESS	518 W. VAUGHN POER			
July 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 O1 / 16 / 200 5 THROUGH 01 / 15 / 200 5  11 ELECTION  ELECTION DATE Day Year Primary Runoff General Special  12 OFFICE  OFFICE HELD (if any) TAX ASSESSOR  13 OFFICE SOUGHT (if known)	TREASURER		EXTENSION		
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Month Day Year Primary Runoff General Special  12 OFFICE  OFFICE HELD (if any)  TAX ASSESS DR  14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  Name  Primary Runoff General Special  13 OFFICE SOUGHT (if known)  TAX ASSESS DR  13 OFFICE SOUGHT (if known)  TAX ASSESS DR  "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				Year	
TAX ASSESSOR  14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  15 OFFICE SOUGH: (if known)  16 OFFICE SOUGH: (if known)  17 OFFICE SOUGH: (if known)  18 OFFICE SOUGH: (if known)  19 OFFICE SOUGH: (if known)  19 OFFICE SOUGH: (if known)  10 OFFICE SOUGH: (if known)  10 OFFICE SOUGH: (if known)  11 OFFICE SOUGH: (if known)  12 OFFICE SOUGH: (if known)  13 OFFICE SOUGH: (if known)  14 NOTICE  16 OFFICE SOUGH: (if known)  17 OFFICE SOUGH: (if known)  18 OFFICE SOUGH: (if known)  18 OFFICE SOUGH: (if known)  19 OFFICE SOUGH: (if known)  10 OFFICE SOUGH: (if known)  10 OFFICE SOUGH: (if known)  11 OFFICE SOUGH: (if known)  12 OFFICE SOUGH: (if known)  13 OFFICE SOUGH: (if known)  14 OFFICE SOUGH: (if known)  15 OFFICE SOUGH: (if known)  16 OFFICE SOUGH: (if known)  17 OFFICE SOUGH: (if known)  18 OFFICE SOUGH	11 ELECTION	Month Day Year		General	Special
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  Attraction of the direct campaign expenditure.	2 OFFICE		13 OFFICE SOUGHT (if known)	)	
Address / PO Box, Apt. / Suite #: City; State; Zip Code	OF DIRECT CAMPAIGN EXPENDITURE BY OTHER	Candidates are required to disclose this information on	litures made by others without the candi ly if they receive notification of the direct	idate's prior consent or appr t campaign expenditure. ••	oval.
additional pages	_	Address / PO Box, Apt. / Suite #: City; State; Zip	) Code		

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

## FORM C/OH COVER SHEET PG 2

16 C/OH NAME SHERI FRAZIER 16ACCOUNT #(Ethics Commission filors)					
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(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
	areofric				
additional pages		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		O STATE OF THE PROPERTY AND THE STATE OF THE			
18 CONTRIBUTION TOTALS	1. TOTAL I PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$				
	4. TOTAL	POLITICAL EXPENDITURES	\$ _ 0 _		
CONTRIBUTION BALANCE	5. 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 \$				
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.					
Sheri Franzis					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said <u>Sheri Brazier</u> , this the <u>3/st</u> day of <u>yelry</u> , 20 <u>65</u> , to certify which, witness my hand and seal of office.					
Many Signature of officer adn	2 Colla	Printed name of officer administering oath Title	otary Perlies of officer administering oath		