

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: _____ FIRST: **SHERI** MI: _____
 NICKNAME: _____ LAST: **FRAZIER** SUFFIX: _____

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
 ADDRESS / PO BOX: **609 LAKEWAY** APT / SUITE #: _____ CITY: **BURNET** STATE: **TX** ZIP CODE: **78611**
 Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE
 AREA CODE: **(512)** PHONE NUMBER: **756-1750** EXTENSION: _____

6 CAMPAIGN TREASURER NAME
 MS / MRS / MR: _____ FIRST: **SHERI** MI: _____
 NICKNAME: _____ LAST: **FRAZIER** SUFFIX: _____

7 CAMPAIGN TREASURER ADDRESS (Residence or business)
 STREET ADDRESS (NO PO BOX PLEASE): **609 LAKEWAY** APT / SUITE #: _____ CITY: **BURNET** STATE: **TX** ZIP CODE: **78611**

8 CAMPAIGN TREASURER PHONE
 AREA CODE: **(512)** PHONE NUMBER: **756-1750** EXTENSION: _____

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 / 16 / 2008 **07 / 15 / 2008**

11 ELECTION
 ELECTION DATE: Month Day Year: **08 / 04 / 2008**
 ELECTION TYPE: Primary Runoff General Special

12 OFFICE OFFICE HELD (if any): **TAX ASSESSOR** **13 OFFICE SOUGHT (if known)**: **TAX ASSESSOR**

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

OFFICE USE ONLY

Date Received: _____

Date Hand-delivered or Date Postmarked: _____

Receipt # _____ Amount: _____

Date Processed: _____

Date Imaged: _____

FILED
 2008 JUL 16 PM 1:52
 JAMIE PARKER
 COUNTY CLERK
 BURNET COUNTY, TEXAS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME

SHERI FRAZIER

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

GENERAL

SPECIFIC

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

\$ - 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

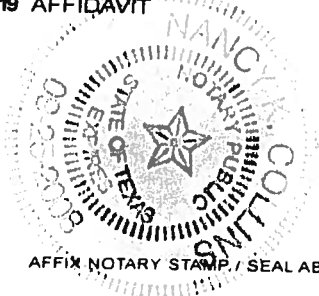
\$ - 0 -

OUTSTANDING LOAN TOTALS

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

\$ - 0 -

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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 Frazier
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Sheri Frazier, this the 16th day of July, 20 08, to certify which, witness my hand and seal of office.

Nancy K. Collins
Signature of officer administering oath

Nancy K. Collins
Printed name of officer administering oath

Notary Public
Title of officer administering oath

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
-- Complete only if "Report Type" on page 1 is marked "Final Report" --

1 C/OH NAME
SHERI FRAZIER

2 ACCOUNT # (Ethics Commission filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Sheri Frazier
Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

-- Complete A & B below only if you are not an officeholder. --

A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

-- Complete this section only if you are an officeholder --

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.

Sheri Frazier
Signature of Officeholder