CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

January 15				
OFFICEHOLDER NAME NICHAME NICHAME SIMON 4 CANDIDATE/ OFFICEHOLDER MALING ADDRESS /FOBOX AFT/SUITE R. CITY. STATE: ZIP CODE MALING ADDRESS /FOBOX AFT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLDER MALING ADDRESS /FOBOX AFT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLDER PHONE OFFICEHOLDER MARING TREASURER NICHAME NICHAME NICHAME STREET ADDRESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLDER PHONE STREET ADDRESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLDER PHONE STREET ADDRESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLDER PHONE STREET ADDRESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLDER PHONE STREET ADDRESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PLASE): NOT/SUITE R. CITY. STATE: ZIP CODE OFFICEHOLD RESS (NOPO BOX PL	The C/OH INSTRUCT	rion Guide explains how to complete	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
ACADIDATE / OFFICEDOLDER MAILING ADDRESS / PO BOX APT / SUITE # CITY, STATE: ZIP CODE MAILING ADDRESS Change of Address CANDIDATE / OFFICEDOLDER MAILING ADDRESS (NO PO BOX PLEASE), APT / SUITE # SUFFIX	OFFICEHOLDER	Peggy	L.	6 6
7 CAMPAIGN TREASURER ADDRESS (NO POBOX PLEASE; APT / SUITE #; CITY: STATE: ZIP CODE STREET ADDRESS (NO POBOX PLEASE; APT / SUITE #; CITY: STATE: ZIP CODE MARBLE FALLS	OFFICEHOLDER MAILING ADDRESS Change of Addres 5 CANDIDATE/ OFFICEHOLDER PHONE 6 CAMPAIGN TREASURER	ADDRESS / PO BOX; APT / SUITE #; 100 Hi- MAABLE F AREA CODE PHONE NUMBER (830) 693-2	VIEW ALLS, TX 78654 EXTENSION	Receipt # Amount
TREASURER ADDRESS (Residence or business) 8 CAMPAIGN TREASURER PHONE 9 REPORT TYPE January 15 July 15 Sth day before election Exceeded \$500 limit Final report (Attach C/OH - FR) 10 PERIOD COVERED Month Day Year THROUGH Final report (Attach C/OH - FR) 11 ELECTION ELECTION DATE Month Day Year Primary Runoff General Special OFFICE OFFICE OFFICE Direct campaign expenditures are campaign expenditures are required to disclose this information only if they receive notification of the direct campaign expenditure. Address / PO Box Apt. / Suite #; City; State; Zip Code	NAME	Simon	SUFFIX	Date Imaged
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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) Month Day Year THROUGH Month Day Year 2 / 2 5 / 0 6 THROUGH Month Day Year COVERED Primary Runoff General Special 12 OFFICE OFFICE HELD (if any) Frimary 13 OFFICE SOUGHT (if known) 4 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS Name Name Name Address / PO Box Apt. / Suite #; City; State; Zip Code Address / PO Box Apt. / Suite #; City; State; Zip Code State; Zip Code Control of the direct campaign expenditure.	TREASURER PHONE	(030)	EXTENSION	
THROUGH COVERED 2 / 25 / 06	10 PERIOD	July 15 Bth day before election	Exceeded \$500 limit	appointment (officeholder only) Final report (Attach C/OH - FR)
Month Day Year Primary Runoff General Special 12 OFFICE OFFICE HELD (if any) 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	COVERED	2/23/06		06
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additional pages	OF DIRECT CAMPAIGN EXPENDITURE BY OTHER	outside are required to disclose this intormation or	ditures made by others without the candid nly if they receive notification of the direct	late's prior consent or approval. campaign expenditure. ••
GO TO PAGE 2	additional pages			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH

Join on	I G IOIAL		COVER SHEET PG 2
15 C/OH NAME	Deggs	L. Simon	16ACCOUNT # (Ethics Commission filers)
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	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ _ 0 -
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	s _ O _
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED TOTALS		\$ -0 -	
	4. TOTAL	POLITICAL EXPENDITURES	\$ _0 -
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 2.02		
OUTSTANDING LOAN TOTALS	6. TOTAL PI LAST DAY	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 7 OF THE REPORTING PERIOD	\$ 0 -
19 AFFIDAVIT			
	POLLY J. BALZEN-KF NOTARY PUBLIC STATE OF TEXA Commission Expires Of	ENEK III OIGE	
Sworn to and subscribe	ed before me, by th	e said Peggy L. Simply y which, witness my hand and seal of office.	this the day
Signature of officer adm	nistering oath	Printed name of officer administering oath Title	officer administering oath