

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:														
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px solid black;">MS / MRS / MR <u>MR</u></td> <td style="width:40%; border-bottom: 1px solid black;">FIRST <u>Lisa</u></td> <td style="width:10%; border-bottom: 1px solid black;">MI <u>J</u></td> </tr> <tr> <td style="border-bottom: 1px solid black;">NICKNAME</td> <td style="border-bottom: 1px solid black;">LAST <u>Whitehead</u></td> <td style="border-bottom: 1px solid black;">SUFFIX</td> </tr> </table>	MS / MRS / MR <u>MR</u>	FIRST <u>Lisa</u>	MI <u>J</u>	NICKNAME	LAST <u>Whitehead</u>	SUFFIX	OFFICE USE ONLY Date Received <div style="font-size: 2em; font-weight: bold; text-align: center;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; text-align: center;">FEB 07 2018</div> <div style="font-weight: bold; text-align: center;">Burnet Co Elections</div>									
MS / MRS / MR <u>MR</u>	FIRST <u>Lisa</u>	MI <u>J</u>															
NICKNAME	LAST <u>Whitehead</u>	SUFFIX															
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>309 Julie Street</u> <u>Burnet, TX 78611</u>	Date Hand-delivered or Date Postmarked															
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 755-1551</u>	Receipt # Amount \$															
6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px solid black;">MS / MRS / MR <u>MR</u></td> <td style="width:40%; border-bottom: 1px solid black;">FIRST <u>Charles</u></td> <td style="width:10%; border-bottom: 1px solid black;">MI <u>E</u></td> </tr> <tr> <td style="border-bottom: 1px solid black;">NICKNAME <u>Eddie</u></td> <td style="border-bottom: 1px solid black;">LAST <u>Whitehead</u></td> <td style="border-bottom: 1px solid black;">SUFFIX</td> </tr> </table>	MS / MRS / MR <u>MR</u>	FIRST <u>Charles</u>	MI <u>E</u>	NICKNAME <u>Eddie</u>	LAST <u>Whitehead</u>	SUFFIX	Date Processed									
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7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>309 Julie Street</u> <u>Burnet, TX 78611</u>	Date Imaged															
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(512) 755-2817</u>																
9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)						
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">Year</td> </tr> <tr> <td style="text-align: center;">01</td> <td style="text-align: center;">/ 01</td> <td style="text-align: center;">/ 18</td> <td></td> <td style="text-align: center;">01</td> <td style="text-align: center;">/ 31</td> <td style="text-align: center;">/ 18</td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	01	/ 01	/ 18		01	/ 31	/ 18
Month	Day	Year	THROUGH	Month	Day	Year											
01	/ 01	/ 18		01	/ 31	/ 18											
11 ELECTION	ELECTION DATE Month Day Year <u>03 / 06 / 18</u>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special															
12 OFFICE	OFFICE HELD (if any) <u>Justice of the Peace Precinct 2</u>	13 OFFICE SOUGHT (if known) <u>Justice of the Peace Precinct 2</u>															

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FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 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

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 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 \$100 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

\$ 354.79

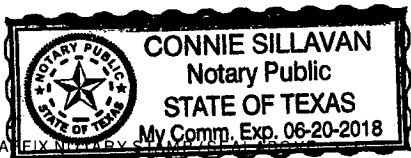
OUTSTANDING
LOAN TOTALS

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

\$ 0

18 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.



Lisa Whitehead
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Lisa Whitehead, this the 7th day of Feb, 2018, to certify which, witness my hand and seal of office.

Connie Sillavan

Signature of officer administering oath

Connie Sillavan

Printed name of officer administering oath

Notary

Title of officer administering oath