	NGN FINAN	CE REPORT	r		FORM C/O COVER SHEET PG
The C/OH Instruc	tion Guide explains how	to complete this form	1 ACCOUNT# (Ethics Cammis	ssion filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLD	MS / MRS / MR	FIRST		MI	
NAME	Mrs	Lisa		<u> </u>	OFFICE USE ONLY
	NICKNAME	LAST	· · · · · · · · · · · · · · · · · · ·	SUFFIX	Date Received
4 CANDIDATE/	ADDRESS / PO BOX:	Whitehe APT/SUITE#	ad	_	SEP SALT SALT SALT SALT SALT SALT SALT SALT
OFFICEHOLDE MAILING	≅R	ornaute#; C	TY; STATE;	ZIP CODE	30
ADDRESS  Change of Add	tress 309 Juli		1		Date Hand-delivered or Date Postmarked
5 CANDIDATE/	AREA CODE	PHONE NUMBER	ret, TX 78		EX C
OFFICEHOLDE PHONE	(SIL) 75	5-1551	EXTENSIO	ON	Receipt # Amount
CAMPAIGN TREASURER	MS / MRS / MR	FIRST		A41	Date Processed
NAME	NICKNAME	Charles		E .	Date Imaged
	Eddie	( )( ) [	ad	SUFFIX	
CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE): APT / SUITE		STATE;	ZIP CODE
ADDRESS (Residence or busines		lie St C	Burnet.	T, .	76. 1
CAMPAIGN TREASURER PHONE	11000	PHONE NUMBER	EXTENSION	1+	78611
REPORT TYPE	(-)				
	January 15	30th day before election	Runoff		15th day after campaign treasurer appointment (officeholder only)
Droise	July 15	8th day before election	Exceeded \$	500 limit	Final report (Altach C/OH - FR)
PERIOD COVERED	100	Year THROUGH	Month	Day	Year
ELECTION		9 	10	121	10
-rection	1 .	ELECTION TYPE			
OFFICE	11/02/1	O Primary	Runoff	∑ Ge	neral Special
A FICE	OFFICE HELD (if any)		13 OFFICE SOUC	GHT (if known)	2 2 2
OTICE OF DIRECT	•• Direct campaign over				Peace Pc+ 2
AMPAIGN XPENDITURE	Candidates are required to	iditures are campalgn expen disclose this information o	iditures made by othe fily if they receive no	rs without the d	candidate's prior consent or approval. direct campaign expenditure. ••
Y OTHER IDIVIDUALS	Name				•• •• •• •• •• •• •• •• •• •• •• •• ••
	Address / PO Box: Apt / Suita	#. City: State: Zip Cod	e		
additional pages		, 500			

## Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 CANDIDATE / OFFICEHOLDER REPORT:

SUPPOR	FORM C/C	
15 C/OH NAME		COVER SHEET PO
Lisa L	) h   .	16 ACCOUNT #
17 NOTICE		16 ACCOUNT # (Ethics Commission
FROM	** This box is for notice of political contributions accepted as political	
POLITICAL	This box is for notice of political contributions accepted or political expenditures made by candidate / officeholder. These expenditures may have been made without the candidate's of Candidates and officeholders are required to report this information only if they receive not	by political committees to support the
COMMITTEE(S)		<ul> <li>onicenoider's knowledge or consent</li> <li>of such expenditures</li> </ul>
	COMMITTEE TYPE COMMITTEE NAME	
	GENERAL NA	
	COMMITTEE ADDRESS	
	SPECIFIC	
additional pages	COMMITTEE CAMPAIGN TREASURER NAME	
:	COMMITTEE CAMPAIGN TREASURER ADDRESS	
		·
8 CONTRIBUTION	1. TOTAL POLITICAL CONTRIBUTION	
TOTALS	<ol> <li>TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS). UNLESS ITEMIZED</li> </ol>	
[_	TEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS	K
	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	
EXPENDITURE		\$
TOTALS	<ol> <li>TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED</li> </ol>	+
1	THE STATE OF THE MIZED	\$ ~
	4. TOTAL POLITICAL EVEN	J* 9
	4. TOTAL POLITICAL EXPENDITURES	
4 1 0 5 e mm n n		\$
CONTRIBUTION	5. TOTAL POLITICAL CONTRACT	$\perp$ $\sigma$
BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	
- R <b>a</b>		\$
OUTSTANDING	6. TOTAL PRINCIPAL AMOUNT OF	28.40
LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	
AFFIDAVIT	- ENIOD	\$
No.		
The state of the s	I swear, or affirm, under penalty of perjury	v. that the accompanying report
TO NO NO	The second includes all information	ation required to be reported by
MED IN	me under Title 15, Election Code.	
5 13 7 E	Si Ki I N Cal	٨
10 CO CAS NO. 1	Wisa Whiteh	errl
1 P	Signature of Candidate o	r Officebolds:
FFIX NOTARY STAMP	AL ABOVE	· Auranoidet.
777		
Sea +	perfore me, by the said Lisa Whitehead	3-41
20_1	to certify which, witness my hand and seal of office.	the 30th day
nane V	1.00.	
unature of officer	ockens Nancy K. Collins M.	<del></del>
gnature of officer administ		ary
	Title of off	icer administering oath