

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	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	NICKNAME	LAST	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;		Date Received
	STATE;	ZIP CODE			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
	()				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	
	NICKNAME	LAST	SUFFIX	Amount \$	
				Date Processed	
				Date Imaged	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	
				ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	()				
9 REPORT TYPE	-DQXDU\	WK GD\ EHIRUH HOHFVLRQII	WK GD\ DIWHU FDPSPDLJQ	WUHDVXUHU DSSRLQWPHQW	
	-XO\	WGD\ EHIRUH HOHFVLRQII	(FHHGRGLILHG) LQDO 5SRVWK & 2+)5	2IILFHKROGHU 2QO\	
10 PERIOD COVERED	Month	Day	Year	Month	
	/	/		/	
			THROUGH		
11 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month	Day	Year	Primary	Runoff
	/	/		General	Special
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)	
127, & 520 32/, 7, & \$/ & 200, 77((6	7+, 0%2; 6)25 127, & 2) 32/, 7, & \$ 2175, %87, 25188 (37(' 252/, 7, & \$/; 3(1', 785 (0\$'(%<32/, 7, & \$/ 200, 77 ((626833257 7+(& \$1', '\$7(2)), & (+2/' (5 THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. & \$1', '\$7(2)), & (+2/' (5653 5(48, 5(' 2 5(3257 7, 6, 1)250\$7, 211/2) 7-(< 5(& (, 9(27, & (2) 6&+ f3(1', 785(6 & 200, 77((7<3 & 200, 77((1\$0(*(1(5\$/ & 200, 77(('\$'5(66 \$GGLWLRQDO 3DJHV & 200, 77((& \$03\$, *1 75(\$685(5 1\$0(63(& ,), & & 200, 77((& \$03\$, *1 75(\$685(5 '\$'5(66				
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule T:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on:		
Schedule A2	Schedule B	Schedule B(J)
Schedule F2	Schedule F4	Schedule G
Schedule C2	Schedule H	Schedule COH-UC
Schedule D	Schedule F1	6 F K H G X O H
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
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Schedule D	Schedule F1	6 F K H G X O H
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