## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

## FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)  2 Total pages filed:		OFFICE USE ONLY				
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mrs. Bern NICKNAME LAST	adette	MI V SUFFIX	Date Received	2015 //11G	
4 ORIGINAL REPORT TYPE	July 15 E	Runoff Other  Exceeded \$500 limit  5th day after treasurer appointment (officeholder only)  Final report	(sp acify)	Date Hand-delivered o	r Date Postmarked	
5 ORIGINAL PERIOD COVERED	Month Day Year 4 / 9 / 2015	Month THROUGH 5	Day Year 1 2015	Date Processed  Date Imaged		
6 EXPLANATION OF CORRECTION						
A miscalculation was noted and corrected.						
7 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.						
Check ONLY if applicable:						
Semiannual reports: I swear, or affirm, that the original report was made in good faith and withou an intent to mislead or to misrepresent the information contained in the report.						
Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or ornis sion in the report as originally filed was made in good faith.  State of Texas Expires:12-04-2018						
AFFIX NOTARY STAMP / SEAL ABOVE  Bemodette Nutrell  Signature of Candidate or Officeholder						
Sworn to and subscribed before me, by the said BOZNADETTE NUTHLL, this the 17TH day of AUGUST,						
20 b, to certify which, witness my hand and seal of office.						
Signature of officer add	ministering oath Print	ed name of officer administering		Title of officer	administering oath	
Remember To Attach Any Part Of The Campaign Finance Report Form  Needed To Report And Explain Corrections						

## **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME Berr	15 ACCOUNT # (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  N/A	BCAR DA 2015 AUG			
	GENERAL SPECIFIC	COMMITTEE ADDRESS	D SELV S IS			
		N/A  COMMITTEE CAMPAIGN TREASURER NAME	3 BC			
additional pages		N/A  COMMITTEE CAMPAIGN TREASURER ADDRESS				
		N/A				
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE					
	2. TOTAL (OTHER	\$ 13,216.27				
EXPENDITURE TOTALS	3. TOTAL P	MIZED \$ 0				
	4. TOTAL POLITICAL EXPENDITURES		\$ 6,154,38			
CONTRIBUTION BALANCE	5. TOTAL PO	\$ 7,061.89				
OUTSTANDING LOAN TOTALS	6. TOTAL P	THE \$ 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.  Netery Public, State of Tends Empires: 12/04/2010  Signature of Candidate or Officeholder						
AFFIX NOTARY STAME	P / SEAL ABOVE	0				
Sworn to and subscribed before me, by the said BERNADETE NUTAL , this the day of AUGUST, 20 15 , to certify which, witness my hand and seal of office.						
Signature of officer admir	olistering oath	GINA LOPEZ N	Title of officer administering oath			