## **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT

P.O. Box 12070

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Gu	uide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:		
0 0, 11, 12, 11, 1	MS)MRS/MR FIRST	MI	OFFICE USE ONLY		
OFFICEHOLDER NAME	(Renée)	A.	Date Received		
	NICKNAME LAST	SUFFIX	APR 9 2015		
	Pasainall		10.514		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #; CITY;	STATE; ZIP CODE			
OFFICEHOLDER MAILING	And Bridgit Dr		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
ADDRESS	10 Diagri Di.		Date Hand-delivered or Postmarked		
change of address	Converse, Tx. 78109		Receipt # Amount		
0 0/11/0/0/11/2/	AREA CODE PHONE NUMBER	EXTENSION	Date Processed		
OFFICEHOLDER (	(210) 658-7628		Date Freessee		
	MS/MRS (MR) FIRST	MI	Date Imaged		
TREASURER NAME	JOHNNY	<u>J</u> ,			
	NICKNAME LAST	SUFFIX			
	(TAKKIS				
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #;	CITY; STATE;	ZIP CODE		
TREASURER ADDRESS	409 Bridgit Dr.				
(residence or business)					
	Converse, Tx. 78	109			
0 0/11111/11011	AREA CODE PHONE NUMBER	EXTENSION			
TREASURER (	(210) 823-8822				
57 A2 564-00 564-00 00					
9 REPORT TYPE	January 15 30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)		
	July 15 8th day before election	Exceeded \$500	Final report (Attach C/OH - FR)		
		limit			
	Month Day Year	Month Day	Year		
COVERED	01/29/15 THROUGH	04/9/	15		
		1.00			
11 ELECTION	ELECTION DATE ELECTION TYPE				
\ \rac{\sigma}{r}	Month Day Year Primary	Runoff	General Special		
	13/4 / 15				
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)			
		At lame.	Place 6		
		111 Leage	1 the f		
GO TO PAGE 2					
SOIGINGER					

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

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Renée A. Paschall 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'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			
	SPECIFIC	COMMITTEE ADDRESS			
additional pages		COMMITTEE CAMPAIGN TREASURER NAME			
30000		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN SES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED  4. TOTAL POLITICAL EXPENDITURES  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
			\$ \$		
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY     OF REPORTING PERIOD				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD				
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.  JACQUELYN PEREZ MY COMMISSION EXPIRES May 21, 2017  Augustian					
Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP / SEAL ABOVE  RIM II DICCOUNTY					
Sworp to and subscribed before me, by the said \( \lambda \) \( \lambda					
JENNA JOCCONELIN PEREL NOTWIN					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					