

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## 4172 FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission filers)

2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Mr  
 FIRST: Stephen  
 MI: N  
 NICKNAME: \_\_\_\_\_  
 LAST: Foster  
 SUFFIX: \_\_\_\_\_

### OFFICE USE ONLY

Date Received

FILED  
Oct 9 2 49 PM '98

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

3543 Graystone Dr. Hill Country, TX 78771

Change of Address

5 CAMPAIGN TREASURER NAME

TITLE: Ms.  
 FIRST: Stacey  
 MI: L.  
 NICKNAME: \_\_\_\_\_  
 LAST: Brown  
 SUFFIX: \_\_\_\_\_

Receipt #

HD / PM

Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2010 Whitin Ave. Bluff Austin TX 78705

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 445-4709

8 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 limit     Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year    THROUGH    Month Day Year  
6 / 30 / 98          10 / 4 / 98

10 ELECTION

ELECTION DATE: Month Day Year  
11 / 03 / 98

ELECTION TYPE:  
 Primary     Runoff     General     Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

District Clerk

13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*

Name

Address / PO Box; Apt / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME	15 ACCOUNT # (Ethics Commission filers)
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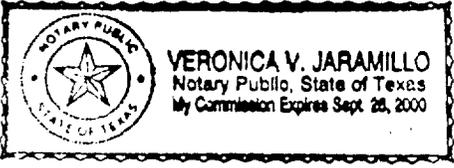
16 SUPPORTING POLITICAL COMMITTEE(S)  <input type="checkbox"/> additional pages	.. This listing includes political expenditures by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

17 NO REPORTABLE ACTIVITY  Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only)

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

### 19 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.



*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said STEPHEN D. Foster this the 9<sup>TH</sup> day of October 19 98, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath