Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

4523

FORM JC/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 13

OFFICE USE ONLY

Date Received

FILED JAN 19 11 11 AM '00

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: JUDGE FIRST: GISELA MI: D

NICKNAME LAST: TRIANA SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 401 APT / SUITE #: E. 35th CITY: Austin STATE: Tx ZIP CODE: 78705

5 CAMPAIGN TREASURER NAME

TITLE FIRST: ART MI

NICKNAME LAST: NAVARRO SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 401 APT / SUITE #: E 35th St CITY: Austin, STATE: Tx ZIP CODE: 78705

7 CAMPAIGN TREASURER PHONE

AREA CODE: (512) PHONE NUMBER: 481-0089 EXTENSION

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: 7 / 1 / 99 THROUGH Month Day Year: 12 / 31 / 99

10 ELECTION

ELECTION DATE Month Day Year: 3 / 14 / 00

ELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): County Court at Law #5

12 OFFICE SOUGHT (if known): County Court at Law #5

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

Printed on recycled paper

(Effective 11/16/1999)

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

14 C/OH NAME: Gisela D. TRIANA

15 ACCOUNT # (Ethics Commission files)

16 SUPPORTING POLITICAL COMMITTEE(S)

•• This listing includes political expenditures 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
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 270.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 5020.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 90.00
	4. **TOTAL POLITICAL EXPENDITURES**	$ 2928.24
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2429.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gisela Triana, this the 18 day of Jan, 20 00, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Print name of officer administering oath	Title of officer administering oath
	Mike Denton	Judge

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 8

2 FILER NAME: Gisela D. Triana

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/13/99	☐ out-of-state PAC MARIA HINOJOSA Austin, Tx	100.00	

9 Contributor's principal occupation: ATTORNEY

10 Contributor's job title:

11 Contributor's employer/law firm:

12 Law firm of contributor's spouse (if any): N/A

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/4/99	☐ out-of-state PAC Raymond Esperson 404 W. 13th St Austin, Tx 78701	250.00	

Contributor's principal occupation: Attorney

Contributor's job title:

Contributor's employer/law firm: Self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	☐ out-of-state PAC Scott Douglass & McConnico LLP 600 Congress Ave Austin, Tx 78701	250.00	

Contributor's principal occupation: LAW FIRM

Contributor's job title:

Contributor's employer/law firm:

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 8

2 FILER NAME: Gisela D. TRIANA

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/28/95	☐ out-of-state PAC Fitzgerald & Meissner, P.C. 812 San Antonio Suite 400 Austin, Tx 78704	100.00	

9 Contributor's principal occupation: Law Firm

10 Contributor's job title:

11 Contributor's employer/law firm:

12 Law firm of contributor's spouse (if any):

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/95	☐ out-of-state PAC Michael Coffey 2203 Fair Oaks Drive	100	

Contributor's principal occupation: attorney

Contributor's job title:

Contributor's employer/law firm: self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/95	☐ out-of-state PAC TRAVIS COUNTY Sheriffs Officers Assoc PAC 200 Brazos, Suite 530, Austin TX 78701	150.00	

Contributor's principal occupation: Law enforcement PAC

Contributor's job title:

Contributor's employer/law firm:

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 8

2 FILER NAME: ~~Az~~ GISELA D. TRIANA

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/28/99	NED GRANGER 605 W 10th St. Austin TX 78701	500.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title:

11 Contributor's employer/law firm: self

12 Law firm of contributor's spouse (if any):

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12-28-99	Betty Blackwell 1806 Nueces St Austin, Tx 78701	500.00	

Contributor's principal occupation: attorney

Contributor's job title:

Contributor's employer/law firm: self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12-28-99	Monty Henson 2903 Clownspoint Drive Austin, TX 78748	50.00	

Contributor's principal occupation: attorney

Contributor's job title:

Contributor's employer/law firm: The Reyes Law Firm

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 6

2 FILER NAME: Gisela Triana

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/28	WADE RUSSELL 6 Contributor address; City; State; Zip Code 404 W. 13th Austin, TX 78701	50.00	

9 Contributor's principal occupation: attorney

10 Contributor's job title:

11 Contributor's employer/law firm: self

12 Law firm of contributor's spouse (if any):

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	Steve Turro Contributor address; City; State; Zip Code 404 W 13th St Austin, TX 78701	100.00	

Contributor's principal occupation: attorney

Contributor's job title:

Contributor's employer/law firm: self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	Paul Ruiz Contributor address; City; State; Zip Code 222 E. Riverside Dr. Apt 129 Austin, TX 78704	250.00	

Contributor's principal occupation: Attorney

Contributor's job title:

Contributor's employer/law firm: Clark, Thomas, Winters, Newton

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 8

2 FILER NAME: Gisela Triana

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Full name of contributor ☐ out-of-state PAC	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/28/99	Eloy Barrera	3712 Aspen Creek Parkway Austin TX 78749	100.00	

9 Contributor's principal occupation: Executive Businessman

10 Contributor's job title:

11 Contributor's employer/law firm: McDonald's Corp.

12 Law firm of contributor's spouse (if any):

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	DAVID Smith	PO Box 537 AUSTIN TX 78767	50	

Contributor's principal occupation: attorney

Contributor's job title:

Contributor's employer/law firm: self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	Lilia Sosa	4970 Hwy 290 W. 460 AUSTIN, TX 78704	100.00	

Contributor's principal occupation: Executive Businesswoman

Contributor's job title:

Contributor's employer/law firm:

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 8

2 FILER NAME: Gisela Triana

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/28/99	Francis W. Williams Montenegro 500 W. 16th St Ste 101 Austin Tx 78701	50.00	

9 Contributor's principal occupation: attorney

10 Contributor's job title:

11 Contributor's employer/law firm: self

12 Law firm of contributor's spouse (if any):

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	Jose Prado 2512 S. IH 35 Ste 130 Austin, Tx 78704	50.00	

Contributor's principal occupation: Realtor

Contributor's job title:

Contributor's employer/law firm: self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	Shelosky Rusk, P.C. 910 Lavaca Austin, Tx 78701	500.00	

Contributor's principal occupation: law firm

Contributor's job title:

Contributor's employer/law firm:

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 8

2 FILER NAME: Carla Triana

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/28/99	John Campbell 805 W 10th St, Ste 400 Austin TX 78701	250.00	

9 Contributor's principal occupation: attorney	10 Contributor's job title
11 Contributor's employer/law firm: self	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date	Full name of contributor ☐ out-of-state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/28/99	Michael Hemer 2400 White Horse Trail Austin, Tx 78756	50.00	

Contributor's principal occupation: attorney	Contributor's job title
Contributor's employer/law firm: self	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

Date	Full name of contributor ☐ out-of-state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12-29-99	Joe Turner 1504 West Ave Austin, Tx 78701	250.00	

Contributor's principal occupation: attorney	Contributor's job title
Contributor's employer/law firm: self	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A(J): 8

2 FILER NAME: Gisela Triana

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Full name of contributor ☐ out-of-state PAC / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/29	SANDRA RITZ 2905 KASSARINE PASS, AUSTIN TX 78704	100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title:

11 Contributor's employer/law firm: Joseph Turner

12 Law firm of contributor's spouse (if any):

13 If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/99	FREN ALLEN JR 5900 Bee Cave Road Austin TX 78749	250.00	

Contributor's principal occupation: attorney

Contributor's job title:

Contributor's employer/law firm: self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date	Full name of contributor ☐ out-of-state PAC / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Contributor's principal occupation:

Contributor's job title:

Contributor's employer/law firm:

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3

2 FILER NAME: Carsela Triana

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Payee name / 6 Payee address; City, State, Zip Code	7 Amount ($)
9/1/99	Greater Mount Zion 1801 Pennsylvania Austin, Tx 78702	57.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contribution

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City, State, Zip Code	Amount ($)
12/21/99	Jana Birchum 2904 Brinwood Ave Austin, Tx 78704	156.00

Purpose of expenditure (See instructions regarding type of information required.): pictures

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City, State, Zip Code	Amount ($)
12/21/99	Hernandez Cafe 1201 E. 6th St, Austin, Tx	250.00

Purpose of expenditure (See instructions regarding type of information required.): food for reception

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City, State, Zip Code	Amount ($)
12/21/99	Carsela Triana 401 E. 35th St Austin, Tx 78705	35.29

Purpose of expenditure (See instructions regarding type of information required.): reimbursement

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3

2 FILER NAME: GISELA TRIANA

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/28/99	Paul Oden 1506 Gaston Austin, TX 78703	250.00

8 Purpose of expenditure (See instructions regarding type of information required.): Reception planning

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/28/99	Travis County Democratic Party 1311 E. 6th St Austin, TX 78702	1700.00

Purpose of expenditure (See instructions regarding type of information required.): filing fee $1200, $500 dinner table for filing DAY DINNER

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/28/99	TRG Communications 2512 S. IH 35, Ste 78704	35.00

Purpose of expenditure (See instructions regarding type of information required.): layout of invitation

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/28/99	LGRL - Lesbian Gay Rights Lobby Court Kin Fund P.O. Box 2579 Austin, TX 78701	100.00

Purpose of expenditure (See instructions regarding type of information required.): Contribution DONATION

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3

2 FILER NAME: Gisela Triana

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name / 6 Payee address; City, State, Zip Code	7 Amount ($)
12/15/99	TRAVIS COUNTY WOMEN'S LAWYERS ASSOC. 507 W. 7TH ST Austin, TX 78701	250.00

8 Purpose of expenditure (See instructions regarding type of information required.): SCHOLARSHIP FUND

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City, State, Zip Code	Amount ($)
7/20/99	Austin Tejano Democrats 8817 Francia Trail Austin TX 78748	100.00

Purpose of expenditure (See instructions regarding type of information required.): Contribution - fundraiser

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City, State, Zip Code	Amount ($)

Purpose of expenditure (See instructions regarding type of information required.):

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

Date	Payee name / Payee address; City, State, Zip Code	Amount ($)

Purpose of expenditure (See instructions regarding type of information required.):

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought / held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED