

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**4874**

**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: _____ FIRST: <u>JEFFREY</u> MI: <u>W</u> NICKNAME: <u>JEFF</u> LAST: <u>HILL</u> SUFFIX: _____	<b>OFFICE USE ONLY</b> Date Received: <u>JUL 16 AM 11:21</u> FILED COUNTY OF BAK THIS OFFICE TEXAS	
4 CANDIDATE / OFFICEHOLDER ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: <u>6814 COMANCHE TR.</u> APT / SUITE #: _____ CITY: _____ STATE: _____ ZIP CODE: <u>AUSTIN TX 78732</u>	Receipt # _____ HD / PM _____ Amount _____ Date Processed _____ Date Imaged _____	
5 CAMPAIGN TREASURER NAME	TITLE: _____ FIRST: <u>JUDY</u> MI: <u>A</u> NICKNAME: _____ LAST: <u>HILL</u> SUFFIX: _____	6 CAMPAIGN TREASURER ADDRESS (Residence or business) STREET ADDRESS (NO PO BOX PLEASE): <u>6814 Comanche tr.</u> APT / SUITE #: _____ CITY: _____ STATE: _____ ZIP CODE: <u>Austin TX 78732</u>	
7 CAMPAIGN TREASURER PHONE	AREA CODE: <u>(512)</u> PHONE NUMBER: <u>512-789-9502</u> EXTENSION: _____	8 REPORT TYPE <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)	
9 PERIOD COVERED	Month: <u>1</u> Day: <u>1</u> Year: <u>01</u> THROUGH Month: <u>6</u> Day: <u>30</u> Year: <u>01</u>		
10 ELECTION	ELECTION DATE Month: <u>  </u> Day: <u>  </u> Year: <u>  </u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any): <u>NONE</u>	12 OFFICE SOUGHT (if known): <u>NO</u>	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	** 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: _____		

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME JEFFREY W HILL

15 ACCOUNT # (Ethics Commission Name)

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  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	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



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Jeffrey W Hill  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Jeffrey Whill this the 16th day of July, 2001, to certify which, witness my hand and seal of office.

Armando R Martinez Notary  
Signature of officer administering oath      Print name of officer administering oath      Title of officer administering oath