

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

5749

**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: 2
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr. NICKNAME	FIRST Allan LAST	MI J. SUFFIX
OFFICE USE ONLY			Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: 5700 Tapadera Trace Lane	APT / SUITE #: *1112	CITY: STATE: ZIP CODE Austin TX 78727
Date Hand-delivered or Date Postmarked			2004 JUN 31 PM 2:14 TRAVIS COUNTY CLERK TRAVIS COUNTY TEXAS
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (361)	PHONE NUMBER 228-1618	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. NICKNAME	FIRST Allan LAST	MI J. SUFFIX
Receipt #			Amount
Date Processed			Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 5700 Tapadera Trace Lane	APT / SUITE #: *1112	CITY: STATE: ZIP CODE Austin TX 78727
8 CAMPAIGN TREASURER PHONE	AREA CODE (361)	PHONE NUMBER 228-1618	EXTENSION
9 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)		
10 PERIOD COVERED	Month Day Year 02 / 09 / 2004	THROUGH	Month Day Year 07 / 15 / 2004
11 ELECTION	ELECTION DATE Month Day Year 11 / 02 / 2004	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Travis County Sheriff	
14 NOTICE OF 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		
<input type="checkbox"/> additional pages			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

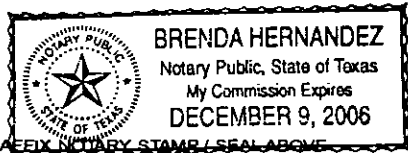
15 C/OH NAME Allan J. Juranek	16 ACCOUNT # (Ethics Commission filers)
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17 NOTICE FROM POLITICAL COMMITTEE(S)	** This box is for notice of political expenditures by political committees to support the candidate / officeholder. <i>These expenditures may 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. **	
<input type="checkbox"/> additional pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$0.00
	4. TOTAL POLITICAL EXPENDITURES	\$0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00

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.



Allan Juranek
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Allan J. Juranek, this the 15th day of July, 2008, to certify which, witness my hand and seal of office.

Brenda Hernandez Brenda Hernandez Adm. Assoc.
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath