

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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	MS. / PREFIX	FIRST	MI	OFFICE USE ONLY	
	MS	DOLORES		Date Received	6449
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	APT / SUITE #	CITY	STATE	ZIP CODE
	P.O. Box 1748 Austin TX 78767				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	512	854-9365			
6 CAMPAIGN TREASURER NAME	MS. / PREFIX	FIRST	MI	OFFICE USE ONLY	
	MS	DOLORES		Date Hand-delivered or Date Postmarked	2997 JAN 19 PM 3:52
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE)	APT / SUITE #	CITY	STATE	ZIP CODE
	P.O. Box 1748 Austin TX 78767				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	512	854-9365			

OFFICE USE ONLY

Date Received: 6449

Date Hand-delivered or Date Postmarked: 2997 JAN 19 PM 3:52

Receipt #: 2997

Date Processed: 2997

Date Indexed: 2997

TRAVIS COUNTY TEXAS

9 REPORT TYPE

January 15 30th day before election Final report (After C/OH - FR) Exceeded \$300 limit

July 15 30th day before election Runoff 15th day after campaign treasurer appointment (off candidate only)

10 PERIOD COVERED

Month Day Year: 11 / 01 / 06 THROUGH Month Day Year: 12 / 31 / 06

11 ELECTION

ELECTION DATE: Month Day Year: 11 / 7 / 06

ELECTION TYPE: Primary Runoff General Special

12 OFFICE: OFFICE HELD (if any) **County Treasurer**

13 OFFICE SOUGHT (if known) **County Treasurer**

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: _____

Not Disclosed

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 CANDIDATE NAME _____ 16 ACCOUNT # (Ethics Commission Filers) _____

17 NOTICE FROM POLITICAL COMMITTEES:

• This box is for notice of 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 promptly when they receive notice of such expenditures. •

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

12 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) UNLESS ITEMIZED	\$	0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0
	4. TOTAL POLITICAL EXPENDITURES	\$	0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	0
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.



Dolores Ortega Carter
Signature of Candidate or Officeholder

NOTARY PUBLIC STAMP / SEAL ABOVE

Witnessed and subscribed before me, by the said Dolores Ortega Carter, this the 12th day of January, 2007, to certify which, witness my hand and seal of office.

Rhonda Ambrose Rhonda Ambrose Notary Public
Signature of Officer administering oath Printed name of officer administering oath Title of officer administering oath