

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7430

FORM C/OH  
COVER SHEET PG 1

|   |   |   |  |
|---|---|---|--|
| The C/OH Instruction Guide explains how to complete this form.                                      |   | 1 ACCOUNT #<br>(Ethics Commission Filers)   | 2 Total pages filed:<br><b>2</b>       |
| 3 CANDIDATE / OFFICEHOLDER NAME   | MS / MRS <input checked="" type="checkbox"/> MR   | FIRST   | MI                                     |
|   | NICKNAME  | LAST  | SUFFIX                                 |
|   |   | <b>S. Glenn Bass</b>  |  |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><input checked="" type="checkbox"/> Change of Address | ADDRESS / PO BOX:   | APT / SUITE #:  | CITY:                                  |
|   | STATE:  | ZIP CODE  |  |
|   |   | <b>3220 Feather Grass Ct.<br/>#9103<br/>Austin, Texas 78758</b>   |  |
| 5 CANDIDATE / OFFICEHOLDER PHONE  | AREA CODE   | PHONE NUMBER  | EXTENSION                              |
|   | <b>(512) 820-5544</b>   |   |  |
| 6 CAMPAIGN TREASURER NAME   | MS / MRS <input checked="" type="checkbox"/> MR   | FIRST   | MI                                     |
|   | NICKNAME  | LAST  | SUFFIX                                 |
|   |   | <b>Debra May</b>  |  |
| 7 CAMPAIGN TREASURER ADDRESS<br>(Residence or Business)   | STREET ADDRESS (NO PO BOX PLEASE):  | APT / SUITE #:  | CITY:                                  |
|   | STATE:  | ZIP CODE  |  |
|   |   | <b>18106 Angel Valley Dr.<br/>Leander, Texas 78641</b>  |  |
| 8 CAMPAIGN TREASURER PHONE  | AREA CODE   | PHONE NUMBER  | EXTENSION                              |
|   | <b>(512) 565-5001</b>   |   |  |
| 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                                   |
|   | 2 / 21 / 10   |   | THROUGH 6 / 30 / 10                    |
| 11 ELECTION   | ELECTION DATE   |   | ELECTION TYPE                          |
|   | Month   | Day   | Year                                   |
|   |   | <b>11 / 2 / 10</b>  |  |
|   |   | <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)            |
|   |   |   | <b>Justice of the Peace Precinct 2</b> |
| 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   |   |   |  |

**OFFICE USE ONLY**

Date Received

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Date Hand-delivered or Date Postmarked

Receipt #

Date Processed

Date Imaged

FILED FOR RECORD  
 2010 JUL 27 PM 1:49  
 CLERK  
 COUNTY CLERK  
 TRAVIS COUNTY TEXAS

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME S. Glenn Bass 16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

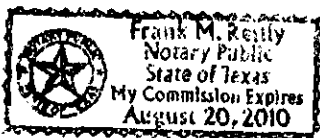
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

|   |                |   |
|---|----------------|---|
| <input type="checkbox"/> GENERAL<br><input checked="" type="checkbox"/> SPECIFIC<br><br><input type="checkbox"/> additional pages | COMMITTEE TYPE | COMMITTEE NAME                                      |
|   |                | <u>Bass For Texas Committee</u>                     |
|   |                | COMMITTEE ADDRESS                                   |
|   |                | <u>P.O. Box 80584<br/>Austin, Texas 78708</u>       |
|   |                | COMMITTEE CAMPAIGN TREASURER NAME                   |
|   |                | <u>Debra May</u>                                    |
|   |                | COMMITTEE CAMPAIGN TREASURER ADDRESS                |
|   |                | <u>18106 Angel Valley Dr.<br/>Lander, Tx. 78641</u> |

18 CONTRIBUTION TOTALS

|   |             |
|---|-------------|
| 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ <u>0</u> |
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$ <u>0</u> |
| EXPENDITURE TOTALS  |             |
| 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED  | \$ <u>0</u> |
| 4. TOTAL POLITICAL EXPENDITURES   | \$ <u>0</u> |
| CONTRIBUTION BALANCE  |             |
| 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$ <u>0</u> |
| OUTSTANDING LOAN TOTALS   |             |
| 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ <u>0</u> |

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.

[Signature]  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said S. Glenn Bass, this the 15 day of JULY, 20 10, to certify which, witness my hand and seal of office.

[Signature] Frank M. Reilly Notary Public, State of Texas  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath