

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

7669

1 ACCOUNT #		2 Total pages filed:		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received 2011 NOV 15 PM 5:03 FILED FOR REPORT Travis County Texas Date Hand-delivered or Postmarked Receipt Amount Date Processed Date Imaged	
	NICKNAME	LAST	SUFFIX		
		Mr. Samuel	T.		
		Biscoe			
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15		<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	
	<input checked="" type="checkbox"/> July 15		<input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		
	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Final report		
5 ORIGINAL PERIOD COVERED		Month Day Year	Month Day Year		
		1 / 1 / 2010	THROUGH 6 / 30 / 2010		

6 EXPLANATION OF CORRECTION

1. \$2,392.11

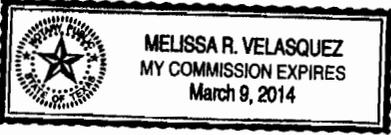
7 AFFIDAVIT

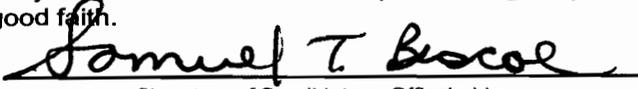
I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

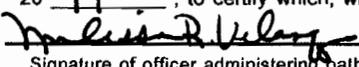
Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.




 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Samuel T. Biscoe, this the 15 day of November, 2011, to certify which, witness my hand and seal of office.


Printed name of officer administering oath
notary
Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

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FOR CANDIDATE/OFFICEHOLDER**

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		1	1	2010	6	30	2010		
		THROUGH						Date Processed	
								Date Imaged	

6 EXPLANATION OF CORRECTION
2. see attached bank statement

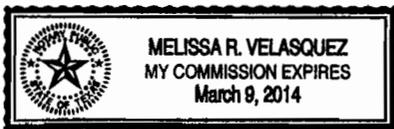
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Samuel T. Biscoe
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Samuel T. Biscoe, this the 15 day of November, 2011, to certify which, witness my hand and seal of office.

Melissa R. Velasquez Melissa R. Velasquez Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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DATE: October 17, 2011

TO: SAM BISCOE
ELECTION COMMITTEE
6411 BRIDGEWATER DR
AUSTIN, TX 78723-3907

FROM: PHOTOCOPY RETRIEVAL - MC 7551

SUBJECT: REQUEST NUMBER:
CASE NUMBER: 890-13OCT11
ACCOUNT NUMBER: 1880338544

Your completed photocopy request is attached.

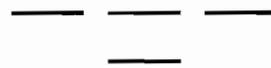
ITEM(S)
X STATEMENT(S)
STATEMENT(S) WITH ITEM(S)

If you have any questions in regard to this request, please contact your original Comerica representative or customer service call center. Please be sure to include the case number or request number in all references to this request.

COMPLETED BY: Operator CSB

QUALITY REVIEWED BY: Operator CSB

Basic Business Checking statement
July 1, 2010 to July 31, 2010



Basic Business Checking account details: 1880338544

Checks paid this statement period

- * This symbol indicates a break in check number sequence
- # This symbol indicates an original item not enclosed
- This symbol indicates a break in check number sequence and an original item not enclosed

Check number	Amount (\$)	Date paid	Bank reference number	Check number	Amount (\$)	Date paid	Bank reference number
# 2663	-200.00	Jul 13	0970100620	• 2666	-100.00	Jul 29	0430003799

Total checks paid this statement period: **-\$300.00**

Total number of checks paid this statement period: **2**

Fees and service charges this statement period

Date	Amount (\$)	Activity	Bank reference number
Jul 14	-5.00	Service Charge	0008768038

Total Fees and Service Charges: **-\$5.00**

Total number of Fees and Service Charges: **1**

\$ Lowest daily balance

Your lowest daily balance this statement period was **\$35,713.84** on **July 29, 2010**.

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	5 ORIGINAL PERIOD COVERED			Date Imaged	

6 EXPLANATION OF CORRECTION

3. 0

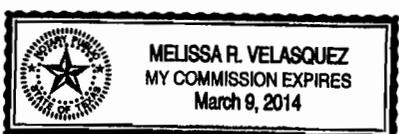
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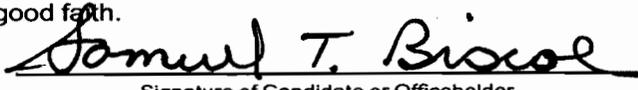
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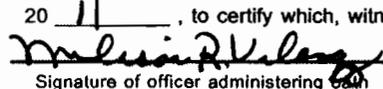
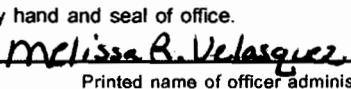
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6 EXPLANATION OF CORRECTION

4. Capital Area Progressive Democrats
3313 Pecan Springs Road
Austin, Tx. 78723

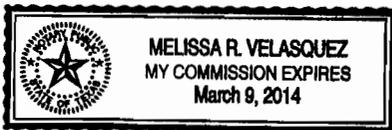
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Samuel T. Biscoe
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Samuel T. Biscoe, this the 15 day of November

20 11, to certify which, witness my hand and seal of office.

Melissa R. Velasquez Melissa R. Velasquez Notary
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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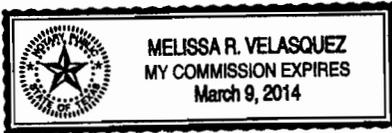
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Signature of Candidate or Officeholder: Samuel T. Biscoe

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Signature of officer administering oath: Melissa R. Velasquez

Printed name of officer administering oath: Melissa R. Velasquez

Title of officer administering oath: Notary

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		1 / 1 / 2010	THROUGH 6 / 30 / 2010		

6 EXPLANATION OF CORRECTION

7. Diana's Flower Shop
Date: May 15, 2010

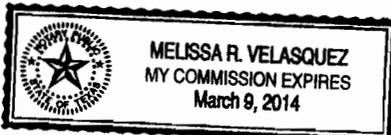
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MELISSA R. VELASQUEZ
MY COMMISSION EXPIRES
March 9, 2014

Samuel T. Biscoe

Signature of Candidate or Officeholder

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Sworn to and subscribed before me, by the said Samuel T. Biscoe, this the 15 day of November, 2011, to certify which, witness my hand and seal of office.

Melissa R. Velasquez

Signature of officer administering oath

Melissa R. Velasquez

Printed name of officer administering oath

Notary

Title of officer administering oath

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