

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7907

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: <div style="font-size: 2em; text-align: center;">2</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: _____ FIRST: <u>BRUCE</u> MI: _____ NICKNAME: _____ LAST: <u>ELFANT</u> SUFFIX: _____	<div style="border: 2px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;">OFFICE USE ONLY</p> <p>Date Received: <u>2012 JUL 16 PM 2:03</u></p> <p style="text-align: center; font-size: 1.2em; font-weight: bold;">FILED FOR RECORD</p> <p style="text-align: center; font-size: 0.8em;">Dana D. Praelovolt County Clerk Travis County, Texas</p> <p>Date Hand Delivered or Postmarked: _____</p> <p>Receipt # _____ Amount: _____</p> <p>Date Processed: _____</p> <p>Date Imaged: _____</p> </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>P.O. BOX 49051 AUS TX 78765</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: <u>(512)</u> PHONE NUMBER: <u>467-2504</u> EXTENSION: _____		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: _____ FIRST: <u>BEVERLY</u> MI: <u>G.</u> NICKNAME: _____ LAST: <u>REEVES</u> SUFFIX: _____		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>221 W-6TH ST SUITE 1000 AUS TX 78701</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE: <u>()</u> PHONE NUMBER: _____ 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 THROUGH Month Day Year <u>1 / 1 / 01</u> <u>6 / 30 / 12</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>11 / 6 / 12</u>	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) <u>CONSTABLE PCT. 5</u>	13 OFFICE SOUGHT (if known)	

GOTO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME	15 ACCOUNT # (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	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.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME ELFANT FOR CONSTABLE Campaign
		COMMITTEE ADDRESS P.O. Box 49051
		COMMITTEE CAMPAIGN TREASURER NAME BEVERLY G. REEVES
	COMMITTEE CAMPAIGN TREASURER ADDRESS 221 W 6TH ST #1000 AUSTIN, TX 78701	

17 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 \$100 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	\$ 9651.26
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.

Bruce Elfant

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bruce Elfant, this the 16th day of July, 20 12, to certify which, witness my hand and seal of office.

C Kortan Cinda Kortan notary
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath