

FORM COR-C/OH

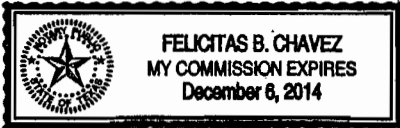
CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

7987

1 ACCOUNT # 2 Total pages filed: 2 OFFICE USE ONLY 3 CANDIDATE / OFFICEHOLDER NAME MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX 4 ORIGINAL REPORT TYPE 5 ORIGINAL PERIOD COVERED

6 EXPLANATION OF CORRECTION In the July 15, 2012 Candidate / Officeholder Campaign Finance Report I corrected the name of the contributor on Schedule A, page 1/1 from Budweiser Beer Company to Brown Distributing Company, Ltd. The corrected page is attached.

7 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check ONLY if applicable: [X] Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. [] 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.



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Ron Davis, this the 8th day of November, 2012, to certify which, witness my hand and seal of office. Felicitas B. Chavez Notary Public

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/24	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 05/29/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown Distributing Company, Ltd. 6 Contributor address; City; State; Zip Code 8711 Johnny Morris Road Austin, TX 78724	7 Amount of contribution (\$) \$120.00	8 In-kind contribution description (if applicable) Five cases of beer for election day event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kampa, Ron & Phuong Contributor address; City; State; Zip Code 3902 Glengarry Dr. Austin, TX 78731	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	