

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:						
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI	<div style="border: 2px solid black; padding: 10px;"> <p><b>OFFICE USE ONLY</b></p> <p>Date Received</p> <p style="font-size: 24px; font-weight: bold;">Received</p> <p style="font-size: 24px; font-weight: bold;">JUL 1 52019</p> <p style="font-size: 24px; font-weight: bold;">Elections Office</p> <p>Date Hand-delivered or Date Postmarked</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table> </div>		Receipt #	Amount \$	Date Processed		Date Imaged	
	Receipt #			Amount \$					
Date Processed									
Date Imaged									
Mrs. . . . . Beverly . . . . .	NICKNAME                      LAST                      SUFFIX								
Crumley									
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE								
<input type="checkbox"/> Change of Address	1203 Rutherford Driftwood, Texas 78619								
<b>5</b> CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION								
	( 512 )                      787-6519								
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI	Receipt #                      Amount \$							
	Mrs. . . . . Tammy . . . . .	Date Processed							
	NICKNAME                      LAST                      SUFFIX	Date Imaged							
Crumley									
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE								
	406 Deerwood Drive San Marcos, Texas 78666								
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION								
	( 512 )                      396-8121								
<b>9</b> 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)								
<b>10</b> PERIOD COVERED	Month                      Day                      Year                      Month                      Day                      Year 01 / 01 / 2019                      THROUGH                      06 / 30 / 2019								
<b>11</b> ELECTION	ELECTION DATE		ELECTION TYPE						
	Month                      Day                      Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description	<input type="checkbox"/> General <input type="checkbox"/> Special						
<b>12</b> OFFICE	OFFICE HELD (if any)	<b>13</b> OFFICE SOUGHT (if known)							
	District Clerk								

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

**14** C/OH NAME **15** Filer ID (Ethics Commission Filers)

**16** 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  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE: _____ COMMITTEE NAME: _____  COMMITTEE ADDRESS: _____  COMMITTEE CAMPAIGN TREASURER NAME: _____  COMMITTEE CAMPAIGN TREASURER ADDRESS: _____
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Additional Pages

<b>17</b> CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 112.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

**18** AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

*Beverly Crumley*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Beverly Crumley, this the 15th day of July, 2019, to certify which, witness my hand and seal of office.

*Kelli Whigham*  
\_\_\_\_\_  
Signature of officer administering oath

Kelli Whigham  
\_\_\_\_\_  
Printed name of officer administering oath

notary public  
\_\_\_\_\_  
Title of officer administering oath