CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

		2000 00 000 000 000 000 000 000 000 000						
The C/OH Instruction	Guide explains how to	complete this form.	1 Filer ID (Ethics Commission Filer	7s) 2 Total pages filed:				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI (4).	OFFICE USE ONLY				
IVANIE	NICKNAME	LAST	SUFFIX	DEGEIAR				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #.	CITY; STATE; ZIP CODE	BY 0 2025 19				
Change of Address	95 Lily Lane	Poet 1	avroa TX 77979					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked				
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST Kelly	MI	Receipt # Amount \$				
NAME	NICKNAME	LAST	SUFFIX	Date Processed Date Imaged				
		Vickery						
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO	PO BOX PLEASE); APT / S	SUITE #; CITY;	STATE; ZIP CODE				
(Residence or Business)	95 Lily Care	PORT	Lavaga	7x 72979				
8 CAMPAIGN TREASURER PHONE	AREA CODE (361) 676	PHONE NUMBER	EXTENSION					
9 REPORT TYPE	January 15	30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)				
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)				
10 PERIOD COVERED	Month	Day Year	Month	Day Year				
	/		THROUGH	/ /				
11 ELECTION	ELECTION DATE		ELECTION TYP	E				
	Month Day	Year Primary	Runoff Other Description					
	/ /	General	Special)				
12 OFFICE	OFFICE HELD (if any)	1-	13 OFFICE SOUGHT (if know	wn)				
44 NOTICE EDOM	100310000 10	£3						
14 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.							
	5.0 71.000.0001 (0.000.000)	OMMITTEE NAME						
Additional Pages	GENERAL COMMITTEE ADDRESS							
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME							
	С	OMMITTEE CAMPAIGN TRE	ASURER ADDRESS					
		GO TO I	PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)						
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$. 						
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$						
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$						
• • •0•0• • •0•0• •0•000 •000• •00	4. TOTAL POLITICAL EXPENDITURES	\$						
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	T DAY \$						
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$ €						
18 SIGNATURE 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.								
		1 1						
	- Cel							
P	Signature of Can	didate or Officeholder						
		8						
(4)								
	Please complete either option below	•						
alaamanaa oo wa								
(1) Affidavit								
NOTARY STAMP/SEA	L							
Sworn to and subscribed	before me by this the _	day of,						
20 , to certify	which, witness my hand and seal of office.							
	, managana soarsi sinosi							
Signature of officer administer	ring oath							
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath						
	OR							
(2) Unsworn Declarati		4/						
My name is Ada	m Viekery, and my date of birth is	04-04-1978						
My address is 95 Cal	y Lane Port lavaga . T.	X . 77979 Calhour.						
	(street) (city) (st	ate) (zip code) (country)						
Executed in Calhoun	County, State of, on the day of							
	day of, off the day of	, 20 <u>.25</u> . (year)						
	and the second							
	Signature of Candida	te/Offigenolder (Declarant)						
		0						

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to complete this for	m.						
		•• Complete only if "Report Type" on page 1 is marked "Fina	I Report"	••					
1	C/OH N	IAME	2 Filer ID	(Ethics Commission Filers)					
		Adam Vickery							
3	SIGNA	TURE /							
	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder								
4		WHO IS NOT AN OFFICEHOLDER		Annual Control of the					
	•• Com	plete A & B below <i>only</i> if you are not an officeholder. ••							
	A.	CAMPAIGN FUNDS							
	Chec	conly one:							
		I do not have unexpended contributions or unexpended interest or income earned fro	m political	contributions.					
		I have unexpended contributions or unexpended interest or income earned from politic may not convert unexpended political contributions or unexpended interest or income personal use. I also understand that I must file an annual report of unexpended cunexpended contributions or unexpended interest or income earned on political contributions that I must dispose of unexpended political interest or income earned on political contributions in accordance with the requirement	ne earned ontributions ibutions lor al contribut	on political contributions to s and that I may not retain ager than six years after ions and unexpended					
	B.	ASSETS							
	Check only one:								
		I do not retain assets purchased with political contributions or interest or other income from political contributions.							
		I do retain assets purchased with political contributions or interest or other income fro that I may not convert assets purchased with political contributions or interest or other personal use. I also understand that I must dispose of assets purchased with political requirements of Election Code, § 254.204.	r income fr	om political contributions to					
		Si	ignature o	f Candidate					
5		EHOLDER plete this section <i>only</i> if you are an officeholder ••							
	\square	I am aware that I remain subject to filing requirements applicable to an officeholder who do file. I am also aware that I will be required to file reports of unexpended contributions if, an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	after filing t	he last required report as					