1-800-325-8506

CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

P.O.Box 12070

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete (Ethics Commission filers) 1 ACCOUNT# (Ethics Commission filers)					
3 CANDIDATE/ OFFICEHOLDER NAME	NICKNAME LAST SUFFIX MI OFFICE USE ONLY Date RECEMBED 111 1 2 2004				
	Jimmy Cardioon Jr				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE; ZIP CODE 3.50 513 Bambi Victoria TX 7790 Date Hand-delivered or Date Postmarked				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (361) 573-332-7 Receipt # Amount				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Date Processed NICKNAME LAST WORL SUFFIX				
	NICKNAME Calaway MCCLIBY SUFFIX				
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE #: CITY: STATE: ZIP CODE 1402 Lower Side Rd Victoria TX 77904				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (301) $582 - 1105$				
9 REPORTTYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)				
10 PERIOD COVERED	Month Day Year 1/16/04 THROUGH 7/15/04				
11 ELECTION	Month Day Year ELECTION TYPE Month Day Year Runoff General Special				
12 OFFICE	office Held (if any) Constable Pot2 Same				
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	•• Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ••				
BY OTHER INDIVIDUALS	Name				
	Address / PO Box; Apt. / Suite #; City; State: Zip Code				
additional pages					
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM C/OH COVER SHEET PG 2

1-800-325-8506

15 C/OH NAME Can'll E (Ethics Commission filers)				
17 NOTICE FROM POLITICAL COMMITTEE(S)	•• This box is for notice of political expenditures 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(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL.	COMMITTEE ADDRESS		
	SPECIFIC	\\A		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME		
·		COMMITTEE CAMPAIGN TREASURER ADDRESS	- 112 1 1 1 1 1 1 1 1 1	
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ N/A	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	s A/A	
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	's N/A	
	4. TOTAL	\$ 1/A		
CONTRIBUTION BALANCE	5. TOTAL OF REP	\$ \(\lambda / A \)		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$			
19 AFFIDAVIT				
SONIA M. JAIME Notary Public, State of Texas My Commission Expires 8-10-2006 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. Signature of Candidate or Officeholder				
AFFIX NOTARY STAMP / SEAL ABOVE				
Sworm to and subscribed before me, by the said				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				
			· · · · · · · · · · · · · · · · · · ·	