

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	NICKNAME	LAST	SUFFIX		
		Debbie G		Date Received	
		Ingalsbe		Received	
				JAN - 7 2019	
				Elections Office	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	4909 S Old Bastrop Hwy San Marcos TX 78666				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(512)	644-0568			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	NICKNAME	LAST	SUFFIX		
		Garry L		Date Hand-delivered or Postmarked	
		Ingalsbe		Receipt #	
				Amount	
				Date Processed	
				Date Imaged	

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
4909 S Old Bastrop Hwy San Marcos TX 78666

8 CAMPAIGN TREASURER PHONE
AREA CODE: (512) PHONE NUMBER: 667-2870 EXTENSION:

9 REPORT TYPE

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 THROUGH Month Day Year
7 / 1 / 18 THROUGH 12 / 31 / 18

11 ELECTION
ELECTION DATE: Month Day Year ELECTION TYPE: Primary Runoff General Special

12 OFFICE: OFFICE HELD (if any)
Hays County Commissioner Pct. 1

13 OFFICE SOUGHT (if known)

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Debbie G Ingalsbe **15 ACCOUNT #** (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 <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

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	\$	
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.

Debbie G Ingalsbe
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Debbie G Ingalsbe, this the 4th day of Jan., 2019, to certify which, witness my hand and seal of office.

Tammy Crumley
Signature of officer administering oath

Tammy Crumley
Printed name of officer administering oath

Notary Public
Title of officer administering oath

Renewal Rates expire in
45 days and are subject
to increase upon
expiration of this offer

LEASE RENEWAL INVITATION

Date: 12/24/2018

To: Sylvia Boasi, Frederick Boasi
1011 Wonder World Dr #0305
San Marcos , TX 78666

Apt: 0305

Dear Sylvia Boasi, Frederick Boasi:

We would like to take this opportunity to thank you for making Palazzo your home. The lease on your apartment will expire on 02/28/2019. We understand that decisions regarding your home are important and wanted to share the following options available to you when your lease ends. If you currently have any elective fees (pet rent, carport, garage, storage) they are included in the prices below. Please place a check mark beside the rate you would like to accept, initial and return the letter to the office to prepare your lease agreement.

_____ 1. You may sign a 12 month lease renewal for \$904.00 per month.

Resident Signature

We would like to remind you that proof of renters insurance is required prior to signing a renewal lease agreement. To assist you in this area, Palazzo has partnered with LeasingDesk Insurance Services and eRenterplan to offer affordable online renters insurance coverage to our residents. Just call (877) 487-0309 or visit www.renterslive.com to learn more or purchase coverage. If you choose to purchase a policy through LeasingDesk and eRenterplan, proof of resident's minimum required insurance and ongoing maintenance of active coverage is automatically provided to Palazzo and you are not required to take any further action for the duration of the lease. If you choose to purchase the minimum \$100,000 coverage required from a different insurance company, then you must furnish the certificate of insurance prior to signing a renewal lease agreement. You are further required to provide written evidence that Palazzo has been added as an "Interested Party" on the insurance declaration with the following address for purposes of notification of any change or cancellation to coverage:

(Palazzo - Atlantic Pacific Property Management LLC)
PO BOX 115009
Carrollton, TX 75011-5009

If at any time Resident does not have minimum required insurance, Resident is in breach of the Lease Agreement and Landlord shall have, in addition to any other rights under the Lease Agreement, the right but not the obligation to purchase minimum required insurance coverage and seek reimbursement from the Resident in the form of a \$50 per month Lease Violation Fee.

Should you choose not to renew your lease, we would like to remind you, that **your lease agreement requires a sixty (60) day written notice to vacate, be submitted to our office prior to your lease expiring** to avoid paying an insufficient or improper notice fee.

Should you not provide sixty (60) days written notice to vacate, prior to the expiration date of your current lease, it will automatically continue as a month-to-month lease at a rate of 1113.00. You will then be charged the month-to-month rate until a new lease is signed, or notice period is satisfied. Again, we would like to extend our appreciation for making Palazzo your home!

Sincerely,

Suzanne Ponce, Property Manager

Palazzo
1011 Wonder World Dr San Marcos TX 78666-7556
(512) 353-1001