

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<p>The C/OH Instruction Guide explains how to complete this form.</p>		<p><b>1</b> Filer ID (Ethics Commission Filers)</p>	<p><b>2</b> Total pages filed:</p>
<p><b>3</b> CANDIDATE / OFFICEHOLDER NAME</p>	<p>MS / MRS / MR                      FIRST                      MI</p> <p style="text-align: center;"><b>Mr</b>                      <b>Michael</b></p> <p>NICKNAME                      LAST                      SUFFIX</p> <p style="text-align: center;"><b>Torres</b></p>	<p><b>OFFICE USE ONLY</b></p> <p>Date Received</p> <p style="font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="font-size: 1.5em; font-weight: bold;">JUL 17 2017</p> <p style="font-size: 1.5em; font-weight: bold;">ELECTION OFFICE</p> <p>Date Hand-delivered or Date Postmarked</p>	
<p><b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p><input type="checkbox"/> Change of Address</p>	<p>ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE</p> <p style="text-align: center;"><b>121 Ina Ct.                      Kyle TX 78640</b></p>	<p>Receipt #                      Amount \$</p> <p>Date Processed</p> <p>Date Imaged</p>	
<p><b>5</b> CANDIDATE / OFFICEHOLDER PHONE</p>	<p>AREA CODE                      PHONE NUMBER                      EXTENSION</p> <p style="text-align: center;"><b>( 512 )                      667-3905</b></p>	<p>Receipt #                      Amount \$</p> <p>Date Processed</p> <p>Date Imaged</p>	
<p><b>6</b> CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR                      FIRST                      MI</p> <p style="text-align: center;"><b>Mrs</b>                      <b>Linda</b></p> <p>NICKNAME                      LAST                      SUFFIX</p> <p style="text-align: center;"><b>Garcia</b></p>	<p>Receipt #                      Amount \$</p> <p>Date Processed</p> <p>Date Imaged</p>	
<p><b>7</b> CAMPAIGN TREASURER ADDRESS</p> <p>(Residence or Business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE</p> <p style="text-align: center;"><b>225 Zachs Path                      Buda, TX 78610</b></p>		
<p><b>8</b> CAMPAIGN TREASURER PHONE</p>	<p>AREA CODE                      PHONE NUMBER                      EXTENSION</p> <p style="text-align: center;"><b>( 512 )                      750-9190</b></p>		
<p><b>9</b> REPORT TYPE</p>	<p> <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)         </p> <p> <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)         </p>		
<p><b>10</b> PERIOD COVERED</p>	<p>Month                      Day                      Year                      Month                      Day                      Year</p> <p style="text-align: center;"><b>1 / 1 / 16                      THROUGH                      6 / 30 / 16</b></p>		
<p><b>11</b> ELECTION</p>	<p>ELECTION DATE</p> <p>Month                      Day                      Year</p> <p style="text-align: center;"><b>11 / 8 / 16</b></p>	<p>ELECTION TYPE</p> <p> <input type="checkbox"/> Primary                      <input type="checkbox"/> Runoff                      <input type="checkbox"/> Other Description         </p> <p> <input type="checkbox"/> General                      <input type="checkbox"/> Special         </p>	
<p><b>12</b> OFFICE</p>	<p>OFFICE HELD (if any)</p> <p style="text-align: center;"><b>Hays Country Pct 2</b></p>	<p><b>13</b> OFFICE SOUGHT (if known)</p>	
<p>GO TO PAGE 2</p>			