

CANDIDATE/OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM CAOH COVER SHEET PG 1

The CAOH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT#
(Ethics Commission File)

2 Total pages filed:

1

3 CANDIDATE/
OFFICEHOLDER
NAME

TITLE FIRST MI
County Commissioner Debbie G.
NICKNAME LAST SUFFIX

Ingalsbe

OFFICE USE ONLY

7-3-97
RECEIVED JUL 03 1997

4 CANDIDATE/
OFFICEHOLDER
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

4909 Old Bastrop Rd
San Marcos Tx 78666

Change of Address

5 CAMPAIGN
TREASURER
NAME

TITLE FIRST MI
Garry L.
NICKNAME LAST SUFFIX

Ingalsbe

Receipt #

HD / PM Amount

Date Processed

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

4909 Old Bastrop Rd San Marcos Tx 78666

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 392-8382

8 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 CAOH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
1 / 1 / 97 THROUGH 6 / 30 / 97

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
/ /

11 OFFICE

OFFICE HELD (if any)
Co. Commissioner Pct. 1

12 OFFICE SOUGHT (if known)

13 DIRECT CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

** 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. **

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GOTOPAGE2

CANDIDATE/OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM COH COVER SHEET PG 2

14 COH NAME

Debbie Gonzales Ingalsbe

15 ACCOUNT # (Ethics Commission file)

16 SUPPORTING POLITICAL COMMITTEE(S)

** This listing includes 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 TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 NOREPORTABLE ACTIVITY

Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 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 \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

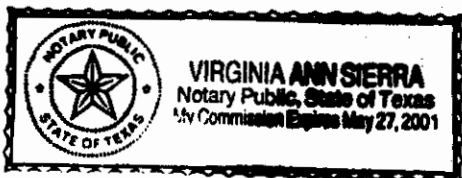
OUTSTANDING LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

19 AFFIDAVIT

I swear, or affirm, 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 2nd day of July, 19 97, to certify which, witness my hand and seal of office.

Virginia Ann Sierra *Virginia Ann Sierra* Notary
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath