

CANDIDATE / OFFICEHOLDER REPORT OF CONTRIBUTIONS, EXPENDITURES, AND LOANS

FORM C/OH

PG 1

See C/OH INSTRUCTION GUIDE for detailed instructions.		1 ACCOUNT #	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST LAST NICKNAME	MI SUFFIX	OFFICE USE ONLY
	Jefferson Barton	W.	REC'D JUL 09 1997 EB
4 CANDIDATE / OFFICEHOLDER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	3480 Jack C. Hays Buda, TX 78610		
5 CAMPAIGN TREASURER NAME	TITLE FIRST LAST NICKNAME	MI SUFFIX	Receipt # HO / PM Amount Date Processed
	Cyndy Slovak-Barton		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	Same		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	268-0841	
8 REPORT TYPE	<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) <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)		
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	1 / 1 / 97		6 / 30 / 97
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
	/ /		
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)	
	County Commissioner		
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	<p>-- 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 expenditures. --</p> Name Address / PO Box; Apt / Suite #; City; State; Zip Code		
	n/a		
<input type="checkbox"/> additional pages			



# POLITICAL EXPENDITURES

# SCHEDULE F

See INSTRUCTION GUIDE for detailed instructions.		1 Total pages Schedule F: 1
2 FILER NAME Jefferson W. Barton		3 ACCOUNT #
4 Date 1/17/97	5 Payee name The Free Press 6 Payee address: City: State: Zip Code P.O. Box 339 Buda, TX 78610	7 Amount (\$) 6904
8 Purpose of expenditure Advertising		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought
Date 6/19/97	Payee name The Free Press Payee address: City: State: Zip Code Same	Amount (\$) \$50-
Purpose of expenditure advertising		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought
Date	Payee name Payee address: City: State: Zip Code	Amount (\$)
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought
Date	Payee name Payee address: City: State: Zip Code	Amount (\$)
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office held / sought

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED