

# 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 files) 2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME  
 MS / MRS / MR: \_\_\_\_\_ FIRST: Jefferson MI: \_\_\_\_\_  
 NICKNAME: \_\_\_\_\_ LAST: Barton SUFFIX: \_\_\_\_\_

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
 ADDRESS / PO BOX: 201 Marietta's Way APT / SUITE #: \_\_\_\_\_ CITY: Buda TX STATE: \_\_\_\_\_ ZIP CODE: 78610  
 Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE  
 AREA CODE: (512) PHONE NUMBER: 268-0841 EXTENSION: \_\_\_\_\_

6 CAMPAIGN TREASURER NAME  
 MS / MRS / MR: \_\_\_\_\_ FIRST: Cyndy MI: \_\_\_\_\_  
 NICKNAME: \_\_\_\_\_ LAST: Slovak-Barton SUFFIX: \_\_\_\_\_

7 CAMPAIGN TREASURER ADDRESS (Residence or business)  
 STREET ADDRESS (NO PO BOX PLEASE): 201 Marietta's Way Buda, TX APT / SUITE #: \_\_\_\_\_ CITY: TX STATE: \_\_\_\_\_ ZIP CODE: 78610

8 CAMPAIGN TREASURER PHONE  
 AREA CODE: (512) PHONE NUMBER: 268-0841 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: 7 / 1 / 07 THROUGH Month Day Year: 12 / 31 / 07

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

12 OFFICE OFFICE HELD (if any): Commissioner Pct. 2 13 OFFICE SOUGHT (if known): \_\_\_\_\_

14 NOTICE OF 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

OFFICE USE ONLY

Date Received: JAN 15 2008

**RECEIVED IN THE  
ELECTION OFFICE**

Receipt # \_\_\_\_\_ Amount \_\_\_\_\_

Date Processed \_\_\_\_\_

Date Imaged \_\_\_\_\_

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME

*Jeff Barton*

16 ACCOUNT # (Ethics Commission Form)

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 TYPE

GENERAL

SPECIFIC

additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

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

\$ *21.50*

4. TOTAL POLITICAL EXPENDITURES

\$ *21.50*

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ *909.73*

OUTSTANDING LOAN TOTALS

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

\$ *9800 -*

### 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.



AFFIX NOTARY STAMP / SEAL ABOVE

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Jeff Barton, this the 15 day of Jan, 2008, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Joyce A. Cowan  
Printed name of officer administering oath

NOTARY  
Title of officer administering oath