CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

OFFICEHOLDER NAME ADDRESS / PO BOX: APT / SUITE #: CFTY; STATE: 2IP CODE OFFICEHOLDER MALING ADDRESS / PO BOX: APT / SUITE #: CFTY; STATE: 2IP CODE Change of Address Change of Address CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER CEMENT AREA CODE PHONE NUMBER CEMENT AND AREA CODE PHONE NUMBER CLEMENT Date Hand-delivered or Date Postmarked PHONE PHONE Date Hand-delivered or Date Postmarked Date Hand-delivered or Date Postmarked PHONE PHONE					
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January 15	TREASURER	AREA CODE PHONE NUMBER EXTENSION		ž.	
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Month Day Year Primary Runoff Other Description General Special		7/15/15 THROUGH	MARGERY EL AIRE		
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15 (Filer ID (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.				
	COMMITTEE TYPE	COMMITTEE NAME	4		
591	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages	6	31 8			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		30:			
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$		\$		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ ~		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ —		
	4. TOTAL POLITICAL EXPENDITURES		\$		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 4,964.89		\$ 4,964.89		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
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, Efection Code. MARGERY ELAINE HOPKINS My Commission Expires July 9, 2018 Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP/SEAL ABOVE					
Sworn to and subscri	1 0	the said Edmund T. Gardon ocertify which, witness my hand and seal of office.	_, this the		
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