

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 Filers)	2 Total pages filed: 2/36
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. BRANDON NICKNAME LAST SUFFIX BAKER	OFFICE USE ONLY Date Received BY: LAURA A. KUBLES DEPUTY CLERK 2012 JAN 13 PM 1:32 Date Hand-delivered or postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7252 CR 277 KAUFMAN TX 75142		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 763-2369		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. GREG NICKNAME LAST SUFFIX MERITT		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8310 FM 2860 KAUFMAN TX 75142		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 717-9614		
9 REPORT TYPE	<input checked="" 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 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)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 11 / 15 / 11 THROUGH 12 / 31 / 11		
11 ELECTION	ELECTION DATE Month Day Year 4 / 3 / 12	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) COMMISSIONER Pct. 1	
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