

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM JC/OH COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission filers)  
00055159

2 PAGE #  
1 of 4

14

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI  
B. Michael  
NICKNAME LAST SUFFIX  
Mike Chitty

OFFICE USE ONLY

Date Received

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
P.O. Box 610  
Terrell, TX 75160

Change of Address

Date Hand Delivered or Date Postmarked

Receipt #

Amount

5 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Hal  
NICKNAME LAST SUFFIX  
Richards

Date Processed

Date Imaged

6 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
4 Cartwright Street  
Terrell, TX 75160

7 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(972) 563-0390

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 C/OH - FR)

9 PERIOD  
COVERED

Month Day Year THROUGH Month Day Year  
07/01/2005 12/31/2005

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  General  Special

11 OFFICE

OFFICE HELD (if any)  
District Judge District 422

12 OFFICE SOUGHT (if known)

13 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

GO TO PAGE 2

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM JC/OH  
COVER SHEET PG 2**

**14 C/OH NAME** Chitty, B. Michael

**15 ACCOUNT #** (Ethics Commission filers)  
00055159

**16 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**

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

**17 CONTRIBUTION TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0.00

**EXPENDITURE TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 659.25

**CONTRIBUTION BALANCE**

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

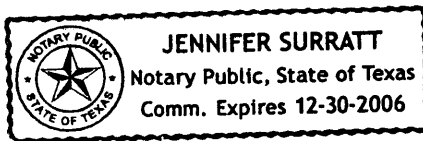
\$ 9,380.34

**OUTSTANDING LOAN TOTALS**

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

\$ 0.00

**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, Election Code.

*[Handwritten Signature]*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said B. MICHAEL CHITTY, this the 17th day of January, 20 06, to certify which, witness my hand and seal of office.

*Jennifer Surratt*

Signature of officer administering oath

JENNIFER SURRATT

Print name of officer administering oath

NOTARY PUBLIC

Title of officer administering oath

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/2 Report: 3/4
<b>2</b> FILER NAME Chitty, B. Michael		<b>3</b> ACCOUNT # (Ethics Commission filers) 00055159
<b>4</b> Date  08/27/2005	<b>5</b> Payee name Kaufman Chamber of Commerce  <b>6</b> Payee address; City; State; Zip Code 2100 S. Washington Kaufman, TX 75142	<b>7</b> Amount (\$)  \$85.00
<b>8</b> Purpose of payment (See instructions regarding type of information required.) donation		<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
Date  09/18/2005	Payee name Kaufman County Republican Party  Payee address; City; State; Zip Code 807 S. Washington Kaufman, TX 75142	Amount (\$)  \$100.00
Purpose of payment (See instructions regarding type of information required.) political contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/20/2005	Payee name Terrell Chamber of Commerce  Payee address; City; State; Zip Code 1314 W. Moore Avenue Terrell, TX 75160	Amount (\$)  \$70.00
Purpose of payment (See instructions regarding type of information required.) donation		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
Date  11/15/2005	Payee name The Kaufman Herald  Payee address; City; State; Zip Code 300 N. Washington Kaufman, TX 75142	Amount (\$)  \$103.75
Purpose of payment (See instructions regarding type of information required.) Judicial Progress Ad		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:

# POLITICAL EXPENDITURES

## SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 2/2 Report: 4/4

**2** FILER NAME Chitty, B. Michael

**3** ACCOUNT # (Ethics Commission filers)  
00055159

<b>4</b> Date	<b>5</b> Payee name The Terrell Tribune	<b>7</b> Amount (\$)
11/15/2005	<b>6</b> Payee address; City; State; Zip Code 150 9th Street Terrell, TX 75160	\$137.50

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Judicial Progress Ad	<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
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Date	Payee name USPS	Amount (\$)
09/17/2005	Payee address; City; State; Zip Code 200 N. Frances Terrell, TX 75160	\$37.00

Purpose of payment (See instructions regarding type of information required.) postage	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
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Date	Payee name USPS	Amount (\$)
12/30/2005	Payee address; City; State; Zip Code 200 N. Frances Terrell, TX 75160	\$126.00

Purpose of payment (See instructions regarding type of information required.) Officeholder post office box rental	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
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