

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filer)

2 Total pages filed

3 pg s.

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

Sandra

O

LAST

Wolff

SUFFIX

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE

mailing address: Blud St #225-207
200 University Round Rock, Tx 78665

Home address: 1511 Frink St Taylor Tx 76574

Change of Address

5 CANDIDATE /
OFFICEHOLDER
PHONE
Home / cell

AREA CODE

PHONE NUMBER

EXTENSION

(512) 317-3981

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

Sandra

O

LAST

Wolff

SUFFIX

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE # CITY STATE ZIP CODE
mailing: 200 University Blud St #225-207 Round Rock Tx 78665
Home address: 1511 Frink St. Taylor, Tx 76574

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE
Home / cell

AREA CODE

PHONE NUMBER

EXTENSION

(512) 317-3981

9 REPORT TYPE

January 15 30th day before election Runoff
 July 15 8th day before election Exceeded Modified Reporting Limit

15th day after campaign treasurer appointment (Officeholder Only)
 Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year

Month Day Year

THROUGH

11 ELECTION

ELECTION DATE

ELECTION TYPE

Month Day Year

Primary Runoff Other Description

General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

District #2
City of Taylor Tx Council Member

14 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.

GENERAL

COMMITTEE NAME

SPECIFIC

COMMITTEE ADDRESS

Additional Pages

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	Sandra O. Wolff		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ N/A
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ N/A
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE		\$ N/A
	4. TOTAL POLITICAL EXPENDITURES		\$ N/A
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ N/A
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ N/A
OUTSTANDING LOAN TOTALS			

18 SIGNATURE 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.


Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____,

20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____, _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)



SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME

Sandra O. Wolff

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULESUBTOTAL
AMOUNT

1. <input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>M/A</i>
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>N/A</i>
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>N/A</i>
4. <input type="checkbox"/>	SCHEDULE E: LOANS	\$ <i>N/A</i>
5. <input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>N/A</i>
6. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>N/A</i>
7. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>N/A</i>
8. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>N/A</i>
9. <input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>N/A</i>
10. <input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>N/A</i>
11. <input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>N/A</i>
12. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>N/A</i>