## CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT Total pages filed: Filer ID (Ethics Commission Filers) The C/OH instruction Guide explains how to complete this form. MI **FIRST** MS / MRS / MR OFFICE USE ONLY 3 CANDIDATE/ OFFICEHOLDER Robert Mr. Date Received NAME SUFFIX LAST NICKNAME Jr. **Blount** Bobby ZIP CODE STATE; CITY; APT / SUITE #; ADDRESS / PO BOX; 4 CANDIDATE/ TX 78253 13450 Sunnyview Trails San Antonio OFFICEHOLDER MAILING ADDRESS Change of Address EXTENSION PHONE NUMBER AREA CODE Date Hand-delivered or Date Postmarked 5 CANDIDATE/ OFFICEHOLDER (210)334-1320 PHONE Receipt # Amount \$ MI **FIRST** MS / MRS / MR CAMPAIGN Sandra TREASURER Mrs. **Date Processed** NAME SUFFIX LAST NICKNAME Date Imaged Sandoval ZIP CODE STATE; CITY; STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CAMPAIGN 78253 San Antonio 13450 Sunnyview Trails TREASURER ADDRESS (Residence or Business) EXTENSION AREA CODE PHONE NUMBER CAMPAIGN TREASURER PHONE 210 643-3300 REPORT TYPE 15th day after campaign Runoff 30th day before election January 15 treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Month Year Day Day Year Month COVERED 6 THROUGH **ELECTION TYPE ELECTION DATE** 11 ELECTION Primary Runoff Other Day Year Month Description Special General OFFICE HELD (if any) OFFICE SOUGHT (if known) 12 OFFICE Northside ISD District #4 14 NOTICE FROM 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 POLITICAL CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS GO TO PAGE 2

## CANDIDATE / OFFICEHOLDER FORM C/OH COVER SHEET PG 2 CAMPAIGN FINANCE REPORT 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) Robert Blount, Jr. 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTAL UNITEMIZED POLITICAL EXPENDITURE. TOTALS 0.00 TOTAL POLITICAL EXPENDITURES CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 257.00 \$ BALANCE OF REPORTING PERIOD OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 15,817.50 LOAN TOTALS LAST DAY OF THE REPORTING PERIOD **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 Robert Blount, Jr. and my date of birth is 01/31/1959 My address is 13450 Sunnyview Trails San Antonio 78253 Bexar (street) 7 & \* (city) (state) (zip code) (country)

Executed in Bexar

(month)

Signature of Candidate/Officeholder (Declarant)

County, State of Texas

(year)