

# 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 Filers)	2 Total pages filed: <div style="border: 1px solid black; padding: 2px; display: inline-block;">24</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <div style="display: flex; justify-content: space-between;"><div>Ms</div><div>Micki</div><div>L</div></div>		<b>OFFICE USE ONLY</b>  Date Received <div style="font-size: 1.2em;">10/9/16</div>  Date Hand-delivered or Date Postmarked  Receipt # Amount \$ Date Processed <div style="font-size: 1.2em;">10/9/16</div> Date Imaged <div style="font-size: 1.2em;">10/10/16</div>
	NICKNAME LAST SUFFIX <div style="display: flex; justify-content: space-between;"><div></div><div>Ball</div><div></div></div>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="text-align: center; padding: 5px;">PO Box 163, Elmendorf, TX 78112</div>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="display: flex; justify-content: space-between;"><div>( 512 )</div><div>922-9091</div><div></div></div>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <div style="display: flex; justify-content: space-between;"><div>Ms</div><div>Micki</div><div>L</div></div>		
	NICKNAME LAST SUFFIX <div style="display: flex; justify-content: space-between;"><div></div><div>Ball</div><div></div></div>		
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="text-align: center; padding: 5px;">PO Box 163, Elmendorf, TX 78112</div>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="display: flex; justify-content: space-between;"><div>( 512 )</div><div>922-9091</div><div></div></div>		
<div style="font-size: 1.5em; font-weight: bold;">Received 10/9/16</div> <div style="font-size: 1.2em; font-weight: bold;">City Clerk</div> <div style="font-size: 1.2em; font-weight: bold;">Sandy Oaks, TX</div>			
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input checked="" type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded \$500 limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>		
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year  <div style="border: 1px solid black; padding: 2px;">7</div> / <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div> <div>THROUGH</div> <div> Month Day Year  <div style="border: 1px solid black; padding: 2px;">07</div> / <div style="border: 1px solid black; padding: 2px;">25</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div> </div>		
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE  Month Day Year  <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div> <div> ELECTION TYPE  <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </div> </div>		
12 OFFICE	OFFICE HELD (if any) <div style="text-align: center; padding: 5px;">Mayor</div>	13 OFFICE SOUGHT (if known) <div style="text-align: center; padding: 5px;">Mayor</div>	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

Micki L. Ball

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

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

Received 10/9/16  
City Clerk  
Sandy C. TX

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 \$100 OR LESS,  
UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 0.00

CONTRIBUTION  
BALANCE

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

\$

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.

Micki L. Ball

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Micki L. Ball, this the 6th day of October, 20 16, to certify which, witness my hand and seal of office.

Leta E. Marquez Leta E. Marquez

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath



**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19** FILER NAME

Micki L. Ball

**20** Filer ID (Ethics Commission Filers)**21** SCHEDULE SUBTOTALS  
NAME OF SCHEDULESUBTOTAL  
AMOUNT

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

Received 10/9/16  
City Clerk  
Sandy Oaks, TX

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: <div style="border: 1px solid black; width: 50px; text-align: center; margin: 0 auto;">4</div>
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR <div style="border: 1px solid black; padding: 2px;">Ms</div></div> <div>FIRST <div style="border: 1px solid black; padding: 2px;">Micki</div></div> <div>MI <div style="border: 1px solid black; padding: 2px;">L</div></div> </div> <hr style="border: 0; border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME <div style="border: 1px solid black; padding: 2px;"></div></div> <div>LAST <div style="border: 1px solid black; padding: 2px;">Ball</div></div> <div>SUFFIX <div style="border: 1px solid black; padding: 2px;"></div></div> </div>		<b>OFFICE USE ONLY</b>  Date Received <div style="font-size: 1.2em; color: blue;">10/9/16</div>
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE  <div style="border: 1px solid black; padding: 5px; text-align: center;">PO Box 163, Elmendorf, TX 78112</div>		<div style="border: 1px solid black; padding: 2px; border-radius: 5px; display: inline-block;">Date Hand-delivered</div> or Date Postmarked  <div style="display: flex; justify-content: space-between;"> <div>Receipt #</div> <div>Amount \$</div> </div> <div style="border: 1px solid black; padding: 2px;">Date Processed 10/9/16</div> <div style="border: 1px solid black; padding: 2px;">Date Imaged 10/10/16</div>
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE    PHONE NUMBER    EXTENSION <div style="display: flex; justify-content: space-between;"> <div>( 512 )</div> <div>922-9091</div> <div></div> </div>		
<b>6</b> CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR <div style="border: 1px solid black; padding: 2px;">Ms</div></div> <div>FIRST <div style="border: 1px solid black; padding: 2px;">Micki</div></div> <div>MI <div style="border: 1px solid black; padding: 2px;">L</div></div> </div> <hr style="border: 0; border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME <div style="border: 1px solid black; padding: 2px;"></div></div> <div>LAST <div style="border: 1px solid black; padding: 2px;">Ball</div></div> <div>SUFFIX <div style="border: 1px solid black; padding: 2px;"></div></div> </div>		
<b>7</b> CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE  <div style="border: 1px solid black; padding: 5px; text-align: center;">PO Box 163, Elmendorf, TX 78112</div>		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE    PHONE NUMBER    EXTENSION <div style="display: flex; justify-content: space-between;"> <div>( 512 )</div> <div>922-9091</div> <div></div> </div> <div style="position: relative; height: 100px;"> <div style="position: absolute; top: 0; right: 0; font-size: 1.5em; color: blue; text-align: right;">             Received 10/9/16              City Clerk              Sandy Oaks, TX           </div> </div>		
<b>9</b> REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input checked="" type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded \$500 limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>		
<b>10</b> PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div>             Month    Day    Year  <div style="border: 1px solid black; padding: 2px;">7</div> / <div style="border: 1px solid black; padding: 2px;">26</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div> <div>THROUGH</div> <div>             Month    Day    Year  <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div> </div>		
<b>11</b> ELECTION	<div style="display: flex; justify-content: space-between;"> <div>             ELECTION DATE              Month    Day    Year  <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div> <div>             ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special           </div> </div>		
<b>12</b> OFFICE	OFFICE HELD (if any) <div style="border: 1px solid black; padding: 5px; text-align: center;">Mayor</div>	<b>13</b> OFFICE SOUGHT (if known) <div style="border: 1px solid black; padding: 5px; text-align: center;">Mayor</div>	

**GO TO PAGE 2**



# 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:			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR		FIRST	MI	OFFICE USE ONLY Date Received  Date Hand-delivered or Postmarked  Receipt #      Amount  Date Processed  Date Imaged		
	Ms		Micki	L			
NICKNAME		LAST	SUFFIX				
Ball							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> change of address	ADDRESS / PO BOX;		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	PO Box 163			Elmendorf	TX	78112	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE		PHONE NUMBER		EXTENSION		
	(      )						
6 CAMPAIGN TREASURER NAME	MS / MRS / MR		FIRST	MI			
	Ms		Micki	L			
NICKNAME		LAST	SUFFIX				
Ball							
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	23203 Hickory Shadow			Elmendorf	TX	78112	
8 CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER		EXTENSION		
	( 512 )		922-9091				
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
	07	16	15		11	03	15
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> General	<input type="checkbox"/> Special
11 / 03 / 15							
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
	Alderman						
GO TO PAGE 2							

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Micki L. Ball

15 ACCOUNT # (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

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 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 \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 0.00

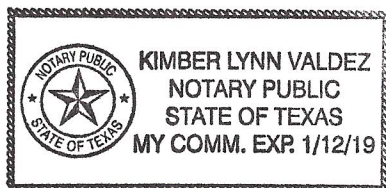
CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 0.00

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.

*Micki L. Ball*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Micki Lynn Ball, this the 20 day of January, 20 11, to certify which, witness my hand and seal of office.

*Kra*  
Signature of officer administering oath

Kimber Lynn Valdez  
Printed name of officer administering oath

notary  
Title of officer administering oath



# 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:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR		FIRST	MI	<b>OFFICE USE ONLY</b>  Date Received   Date Hand-delivered or Postmarked  Receipt #      Amount  Date Processed  Date Imaged
	Ms		Micki	L	
NICKNAME		LAST	SUFFIX		
Ball					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;		APT / SUITE #;	CITY;	STATE;      ZIP CODE
	PO Box 163			Elmendorf	TX      78112
<input type="checkbox"/> change of address					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE		PHONE NUMBER		EXTENSION
	(      )				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR		FIRST	MI	
	Ms		Micki	L	
NICKNAME		LAST	SUFFIX		
Ball					
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;      ZIP CODE
	23203 Hickory Shadow			Elmendorf	TX      78112
8 CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER		EXTENSION
	( 512 )		922-9091		
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	03	15		01      15      16
11 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
		11      03      15			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
	Mayor				
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

Micki L. Ball

15 ACCOUNT # (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

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 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 \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 0.00

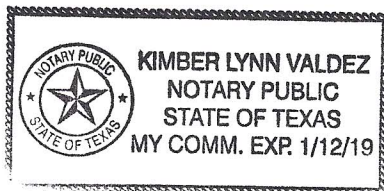
CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 0.00

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

## 18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

*Micki L. Ball*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Micki Lynn Ball, this the 20 day of January, 20 16, to certify which, witness my hand and seal of office.

*Krall*

Signature of officer administering oath

Kimber Lynn Valdez

Printed name of officer administering oath

notary

Title of officer administering oath



# 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:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Ms</b> NICKNAME		FIRST <b>Micki</b> LAST	MI <b>L</b> SUFFIX	OFFICE USE ONLY Date Received  Date Hand-delivered or Postmarked  Receipt # Amount Date Processed Date Imaged	
			<b>Ball</b>			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; <b>PO Box 163</b>		APT / SUITE #;	CITY; <b>Elmendorf</b>		STATE; <b>TX</b>
<input type="checkbox"/> change of address		ZIP CODE <b>78112</b>				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE ( )		PHONE NUMBER		EXTENSION	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Ms</b> NICKNAME		FIRST <b>Micki</b> LAST	MI <b>L</b> SUFFIX		
			<b>Ball</b>			
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); <b>23203 Hickory Shadow</b>		APT / SUITE #;	CITY; <b>Elmendorf</b>	STATE; <b>TX</b>	
		ZIP CODE <b>78112</b>				
8 CAMPAIGN TREASURER PHONE	AREA CODE ( <b>512</b> )		PHONE NUMBER <b>922-9091</b>		EXTENSION	
9 REPORT TYPE	<input 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 checked="" 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 <b>01 / 16 / 16</b> <b>06 / 30 / 16</b>					
11 ELECTION	ELECTION DATE Month Day Year <b>11 / 03 / 15</b>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any) <b>Mayor</b>		13 OFFICE SOUGHT (if known)			
GO TO PAGE 2						

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME

Micki L. Ball

15 ACCOUNT # (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

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 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 \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 0.00

CONTRIBUTION  
BALANCE

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

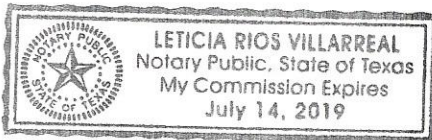
\$ 0.00

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.

*Micki L. Ball*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Micki L. Ball, this the 15<sup>th</sup> day of July, 20 11, 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