

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: 5 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI | OFFICE USE ONLY Date Received Date Hand-Delivered or Postmarked 10/11/11 Receipt # Amount Date Processed 10/11/11 Date Indexed 10/11/11 | |
| | NICKNAME LAST SUFFIX | | |
| Tish Humphrey | H. | | |
| Mrs. Letitia | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE | | |
| 305 Forest Lane <input type="checkbox"/> change of address | Huntsville TX 77340 | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER EXTENSION | | |
| (936) 291-1247 | | | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI | | |
| | NICKNAME LAST SUFFIX | | |
| Mrs. Theresa Alexander | M. | | |
| 7 CAMPAIGN TREASURER ADDRESS (residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE | | |
| 1423 Brazos Drive #D | Huntsville TX 77320 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION | | |
| (936) 291-3603 | | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" 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 |
| 08 / 29 / 2011 | | | 10 / 09 / 2011 |
| 11 ELECTION | ELECTION DATE Month Day Year | ELECTION TYPE | |
| | 11 / 08 / 2011 | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (if known) | |
| | | City Council - Ward 2 | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Letitia (Tish) H. Humphrey

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

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$1,100.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$3,150.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0

4. TOTAL POLITICAL EXPENDITURES \$2,413.57

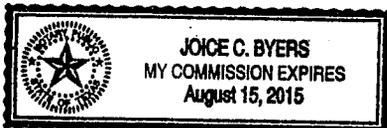
CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 736.43

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0

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.

Letitia Humphrey
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Letitia H. Humphrey, this the 11 day of October, 20 11, to certify which, witness my hand and seal of office.

Joice C. Byers
Signature of officer administering oath

Joice C. Byers
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|---|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A: 2 | |
| 2 FILER NAME Letitia (Tish) H. Humphrey | | 3 ACCOUNT # (Ethics Commission Filers) | |
| 4 Date 09/09/11 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George D. Miles, Jr. 6 Contributor address; City; State; Zip Code 673 Elkins Lake Huntsville, TX 77340 | 7 Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T) | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 09/02/11 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davie & Jackie Ward Contributor address; City; State; Zip Code 2010 Avenue P Huntsville, TX 77340 | Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 09/21/11 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William B. & Diane Green Contributor address; City; State; Zip Code 470 Elkins Lake Huntsville, TX 77340 | Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 09/26/11 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy F. & Debra Mitcham, Jr. Contributor address; City; State; Zip Code 563 Elkins Lake Huntsville, TX 77340 | Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T) | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 09/26/11 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell Humphrey Contributor address; City; State; Zip Code 305 Forest Lane Huntsville, TX 77340 | Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2

2 FILER NAME

Letitia (Tish) H. Humphrey

3 ACCOUNT # (Ethics Commission Filers)

4 Date

09/26/11

5 Full name of contributor out-of-state PAC (ID#: _____)

The Carpet Store

6 Contributor address; City; State; Zip Code

2801 SamHouston Ave.
Huntsville, TX 77340

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/28/11

Full name of contributor out-of-state PAC (ID#: _____)

Bill & Ann Hodges

Contributor address; City; State; Zip Code

241 Hickory Drive Huntsville, TX 77340

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/28/11

Full name of contributor out-of-state PAC (ID#: _____)

Mr. & Mrs. Tom Freeman

Contributor address; City; State; Zip Code

4119 State Hwy 30 W.
Huntsville, TX 77340

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/28/11

Full name of contributor out-of-state PAC (ID#: _____)

Charlie's Used Cars

Contributor address; City; State; Zip Code

230 I-45 South Huntsville, TX 77340

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/29/11

Full name of contributor out-of-state PAC (ID#: _____)

Mr. & Mrs. Edward C. Hearon

Contributor address; City; State; Zip Code

16119 Sea Palms Crosby, TX 77532

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

| | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F: 1 | | 2 FILER NAME Letitia (Tish) H. Humphrey | | 3 ACCOUNT # (Ethics Commission Filers) | |
| 4 Date 09/27/11 | | 5 Payee name Campaigns & Promotions | | | |
| 6 Amount (\$) \$2,102.67 | | 7 Payee address; City; State; Zip Code 404 I-45 South Huntsville, TX 77340 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See categories listed at the top of this schedule) Advertising Expense | | (b) Description (If travel outside of Texas, complete Schedule T) Yard & Road Signs and Push Cards for door to door | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 09/30/11 | | Payee name Ink Slingers | | | |
| Amount (\$) \$180.90 | | Payee address; City; State; Zip Code 1427 Sam Houston Ave. Huntsville, TX 77340 | | | |
| PURPOSE OF EXPENDITURE | | Category (See categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) Promotional t-shirts to be worn in public for candidate exposure | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 10/06/11 | | Payee name The Huntsville Item, Inc. | | | |
| Amount (\$) \$130.00 | | Payee address; City; State; Zip Code 1409 10th Street Huntsville, TX 77340 | | | |
| PURPOSE OF EXPENDITURE | | Category (See categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) The Candidate - Political Ad | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date | | Payee name | | | |
| Amount (\$) | | Payee address; City; State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | | Category (See categories listed at the top of this schedule) | | Description (If travel outside of Texas, complete Schedule T) | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

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