

# 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 #<br>(Ethics Commission Filers)   | 2 Total pages filed:<br><div style="text-align: center; font-size: 24px; font-weight: bold;">2</div> |
| 3 CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR      FIRST      MI<br>MS      Kathryn      R<br><hr/> NICKNAME      LAST      SUFFIX<br>Katie      Newman   | <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; font-weight: bold; margin: 0;">OFFICE USE ONLY</p> <p style="font-size: 8px; margin: 0;">Date Received</p> <div style="border: 1px solid black; padding: 2px; text-align: center; font-weight: bold; font-size: 12px; margin: 2px 0;">RECEIVED</div> <p style="font-size: 14px; margin: 2px 0;">JUL 06 2012</p> <p style="font-size: 18px; margin: 2px 0;">BY: [Signature]</p> <p style="font-size: 8px; margin: 0;">Date Hand Delivered or Postmarked</p> <p style="font-size: 14px; margin: 2px 0;">7/6/12</p> <p style="font-size: 8px; margin: 0;">Receipt #      Amount</p> <p style="font-size: 8px; margin: 0;">Date Processed</p> <p style="font-size: 14px; margin: 2px 0;">7/6/12</p> <p style="font-size: 8px; margin: 0;">Date Imaged</p> <p style="font-size: 14px; margin: 2px 0;">7/6/12</p> </div> |  |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><input type="checkbox"/> change of address | ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE<br>1410 Nottingham St #10301<br>Huntsville, TX 77340   |   |  |
| 5 CANDIDATE / OFFICEHOLDER PHONE   | AREA CODE      PHONE NUMBER      EXTENSION<br>(281) 797-7595  |   |  |
| 6 CAMPAIGN TREASURER NAME  | MS / MRS / MR      FIRST      MI<br>MR      Orlando<br><hr/> NICKNAME      LAST      SUFFIX<br>Gray   |   |  |
| 7 CAMPAIGN TREASURER ADDRESS<br>(residence or business)                                  | STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE<br>1410 Nottingham St #5304<br>Huntsville, TX 77340   |   |  |
| 8 CAMPAIGN TREASURER PHONE   | AREA CODE      PHONE NUMBER      EXTENSION<br>(972) 765-3566  |   |  |
| 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)<br><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<br>01 / 01 / 12      06 / 30 / 12   |   |  |
| 11 ELECTION  | ELECTION DATE<br>Month      Day      Year<br>N/A      /      /  | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special   |  |
| 12 OFFICE  | OFFICE HELD (if any)<br><br>N/A   | 13 OFFICESOUGHT (if known)<br><br>N/A   |  |

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Kathryn Newman 15 ACCOUNT # (Ethics Commission Filers) N/A

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.

N/A

additional pages

|                                   |                                      |
|-----------------------------------|--------------------------------------|
| COMMITTEE TYPE                    | COMMITTEE NAME                       |
| <input type="checkbox"/> GENERAL  |                                      |
| <input type="checkbox"/> SPECIFIC |                                      |
|                                   | COMMITTEE ADDRESS                    |
|                                   | COMMITTEE CAMPAIGN TREASURER NAME    |
|                                   | 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 | \$ <u>0</u>     |
|                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$ <u>0</u>     |
| EXPENDITURE TOTALS      | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$ <u>0</u>     |
|                         | 4. TOTAL POLITICAL EXPENDITURES   | \$ <u>0</u>     |
| CONTRIBUTION BALANCE    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$ <u>42.44</u> |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ <u>0</u>     |

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.

Kathryn Newman  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kathryn Newman, this the 6th day of July, 20 12, to certify which, witness my hand and seal of office.

[Signature] Lee Woodward City Secretary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath