

FORM COR-C/OH

# **CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER**

1 ACCOUNT #		2 Total pages filed.		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>MR</u>	FIRST <u>ERIC</u>	MI <u>J</u>	Date Received	AUSTIN CITY CLERK RECEIVED JAN 24 AM 8 24
	NICKNAME	LAST <u>PANBOL</u>	SUFFIX	Date Hand-delivered or Postmarked	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Receipt #	Amount
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Date Processed	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Date Imaged	
	<input type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Final report			
5 ORIGINAL PERIOD COVERED	Month / Day / Year	THROUGH	Month / Day / Year		

## 6 EXPLANATION OF CORRECTION

*Final Report was accidentally filed.*

## 7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:



I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

*[Signature]*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Eric Javier Rangel this the 24 day of JANUARY.

20 11, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Reyna Ruiz  
Printed name of officer administering oath

Admin Specialist  
Title of officer administering oath

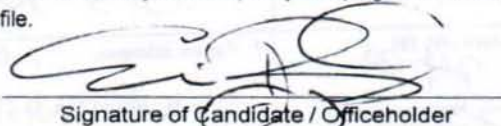
**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

**CANDIDATE / OFFICEHOLDER REPORT:  
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

The Instruction Guide explains how to complete this form.  
\*\* Complete only if "Report Type" on page 1 is marked "Final Report" \*\*

**1 C/OH NAME****2 ACCOUNT # (Ethics Commission Filers)****3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

  
Signature of Candidate / Officeholder**4 FILER WHO IS NOT AN OFFICEHOLDER**

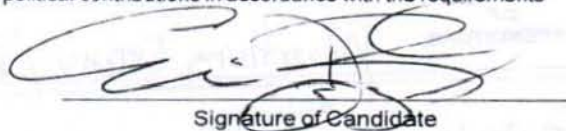
\*\* Complete A & B below *only* if you are not an officeholder. \*\*

**A. CAMPAIGN FUNDS**

Check only one:

☒ I do not have unexpended contributions or unexpended interest or income earned from political contributions.☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.**B. ASSETS**

Check only one:

☒ I do not retain assets purchased with political contributions or interest or other income from political contributions.☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.  
Signature of Candidate**5 OFFICEHOLDER**

\*\* Complete this section *only* if you are an officeholder \*\*

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.  
Signature of Officeholder