

FORM COR-C/OH

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

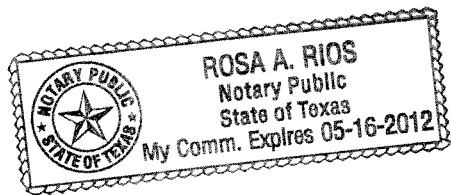
1 ACCOUNT #		2 Total pages filed: <u>2</u>		OFFICE USE ONLY				
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR	FIRST	MI	Date Received			
		NICKNAME	LAST	SUFFIX	RECEIVED 2008 DEC 2 AM 11:54 CITY SECRETARY DALLAS, TEXAS			
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)		Date Hand-delivered or Date Postmarked		
		<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit			Receipt #		
		<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)			Legal Totals		
		<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report		Date Processed			
5 ORIGINAL PERIOD COVERED		Month	Day	Year	Month	Day	Year	Date Imaged
		<u>4</u>	<u>03</u>	<u>07</u>	THROUGH	<u>5</u>	<u>02</u>	<u>07</u>

6 EXPLANATION OF CORRECTION

*Amended Loan Sch E. Report*

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 Tennell Atkins this the 12<sup>th</sup> day of December 2008, to certify which, witness my hand and seal of office.

Signature of officer administering oath: Rosa A. Rios Printed name of officer administering oath: Rosa A. Rios Title of officer administering oath: Notary Public

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

071192

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

TENNEL ATKINS

3 ACCOUNT # (Ethics Commission filers)

4

TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$ 5,906

5 Date of loan

4/11/07

7 Name of lender

Tennell Atkins

out-of-state PAC (ID# \_\_\_\_\_)

9 Loan Amount (\$)

5,906

6 Is lender a financial Institution?

Y

N

8 Lender address; City; State; Zip Code

2717 meadow stone LN  
Dallas TEXAS 75237

10 Interest rate

N/A

11 Maturity date

N/A

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

none

15 GUARANTOR INFORMATION

not applicable

16 Name of guarantor

17 Guarantor address; City; State; Zip Code

18 Amount Guaranteed (\$)

19 Principal Occupation

20 Employer

Date of loan

Name of lender

out-of-state PAC (ID# \_\_\_\_\_)

Loan Amount (\$)

Is lender a financial Institution?

Y

N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

GUARANTOR INFORMATION

not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

Principal Occupation

Employer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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