

# 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:  
**2**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR:   
FIRST: **Penny** MI: **M.**  
NICKNAME: **Anseely** LAST: **Anseely** SUFFIX:

### OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
 Change of Address

ADDRESS / PO BOX: **5430 Beeman Ave.** APT / SUITE #: **Dallas, TX** CITY: **75223** STATE: ZIP CODE

Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE: **(214)** PHONE NUMBER: **823-9511** EXTENSION:

Receipt # Amount

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: **P** FIRST: **Pam** MI: **M.**  
NICKNAME: **GIBBS** LAST: **GIBBS** SUFFIX:

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): **5430 Beeman Ave.** APT / SUITE #: **Dallas, TX** CITY: **75223** STATE: ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE: **(214)** PHONE NUMBER: **827-6130** EXTENSION:

9 REPORT TYPE

January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (officeholder only)  
 July 15  8th day before election  Exceeded \$500 limit  Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year THROUGH Month / Day / Year  
**/ / / THROUGH 1 / 15 / 05**

11 ELECTION

ELECTION DATE: Month / Day / Year  
ELECTION TYPE:  Primary  Runoff  General  Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)  
**unknown**

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  
 additional pages

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*  
Name:  
Address / PO Box: Apt. / Suite #: City: State: Zip Code:

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

\*\* This box is for notice of political expenditures 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 pages

18 CONTRIBUTION TOTALS

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

\$ - 0 -

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ - 0 -

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ - 0 -

CONTRIBUTION BALANCE

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

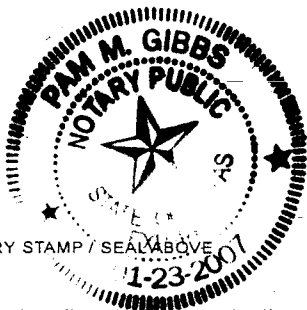
\$ - 0 -

OUTSTANDING LOAN TOTALS

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

\$ - 0 -

19 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.

*Penny M. Andeely*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Penny M. Andeely, this the 14<sup>th</sup> day of Jan, 20 05, to certify which, witness my hand and seal of office.

*Pam M. Gibbs*      Pam M. Gibbs      Notary  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath