

071194

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				
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			
		<input 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>6</u>	<u>07</u>	<u>07</u>	THROUGH	<u>7</u>	<u>13</u>	<u>07</u>

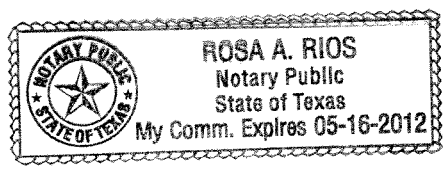
RECEIVED  
 2008 DEC 12 PM 12:01  
 CITY SECRETARY  
 DALLAS, TEXAS

6 EXPLANATION OF CORRECTION

Amended 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 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**

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: 1

2 FILER NAME

Tennell Atkins

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS:

\$ 15,500

5 Date of loan

6/8/07

7 Name of lender

Tennell Atkins

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

9 Loan Amount (\$)

15,500

6 Is lender a financial Institution?

Y

(N)

8 Lender address; City; State; Zip Code

2717 Meadow Stone Ln  
Dallas TX 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

16 Name of guarantor

18 Amount Guaranteed (\$)

not applicable

17 Guarantor address; City; State; Zip Code

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

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

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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