

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

16 JUL 18 PM 12:55:22

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:														
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; border-bottom: 1px solid black;">MS / MRS / MR <u> </u></td> <td style="width:35%; border-bottom: 1px solid black;">FIRST <u>PAUL</u></td> <td style="width:15%; border-bottom: 1px solid black;">MI <u>M</u></td> </tr> <tr> <td style="border-bottom: 1px solid black;">NICKNAME</td> <td style="border-bottom: 1px solid black;">LAST <u>SALDAÑA</u></td> <td style="border-bottom: 1px solid black;">SUFFIX</td> </tr> </table>	MS / MRS / MR <u> </u>	FIRST <u>PAUL</u>	MI <u>M</u>	NICKNAME	LAST <u>SALDAÑA</u>	SUFFIX	OFFICE USE ONLY									
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NICKNAME	LAST <u>SALDAÑA</u>	SUFFIX															
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">ADDRESS / PO BOX; <u>P.O. BOX 1383</u></td> <td style="width:15%;">APT / SUITE #;</td> <td style="width:15%;">CITY; <u>AUSTIN TX</u></td> <td style="width:15%;">STATE; <u>TX</u></td> <td style="width:30%;">ZIP CODE <u>78652</u></td> </tr> </table>	ADDRESS / PO BOX; <u>P.O. BOX 1383</u>	APT / SUITE #;	CITY; <u>AUSTIN TX</u>	STATE; <u>TX</u>	ZIP CODE <u>78652</u>	Date Received										
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7 CAMPAIGN TREASURER ADDRESS (residence or business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%;">STREET ADDRESS (NO PO BOX PLEASE); <u>P.O. BOX 1383</u></td> <td style="width:15%;">APT / SUITE #;</td> <td style="width:15%;">CITY; <u>AUSTIN TX</u></td> <td style="width:15%;">STATE; <u>TX</u></td> <td style="width:20%;">ZIP CODE <u>78652</u></td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE); <u>P.O. BOX 1383</u>	APT / SUITE #;	CITY; <u>AUSTIN TX</u>	STATE; <u>TX</u>	ZIP CODE <u>78652</u>									
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">Month</td> <td style="width:15%;">Day</td> <td style="width:15%;">Year</td> <td style="width:15%; text-align: center;">THROUGH</td> <td style="width:15%;">Month</td> <td style="width:15%;">Day</td> <td style="width:15%;">Year</td> </tr> <tr> <td><u>01</u></td> <td><u>01</u></td> <td><u>2016</u></td> <td></td> <td><u>06</u></td> <td><u>30</u></td> <td><u>2016</u></td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	<u>01</u>	<u>01</u>	<u>2016</u>		<u>06</u>	<u>30</u>	<u>2016</u>
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11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">ELECTION DATE Month Day Year <u>11 / 4 / 2014</u></td> <td colspan="3">ELECTION TYPE</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> </tr> </table>			ELECTION DATE Month Day Year <u>11 / 4 / 2014</u>	ELECTION TYPE				<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special					
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12 OFFICE	OFFICE HELD (if any) <u>AJSD TRUSTEE DISTRICT 6</u>	13 OFFICE SOUGHT (if known)															

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME PAUL M. SALDANA 15 ACCOUNT # (Ethics Commission Filers)

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.

COMMITTEE TYPE
 GENERAL
 SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	—
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	—
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	—
	4. TOTAL POLITICAL EXPENDITURES	\$	—
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	2776.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	—

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.

Paul M. Saldana
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 18th day of July, 20 16, to certify which, witness my hand and seal of office.

Jennifer Gomez
Signature of officer administering oath

Jennifer Gomez
Printed name of officer administering oath

Notary Public
Title of officer administering oath