

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: <div style="font-size: 2em; text-align: center;">2</div>												
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / <input checked="" type="radio"/> MR FIRST MI <div style="text-align: center; font-size: 1.5em;">Jorge</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.5em;">Artalejo</div>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">OFFICE USE ONLY</th> </tr> <tr> <td style="width:50%; padding: 2px;">Date Received</td> <td style="width:50%; padding: 2px;">CITY CLERK DEPT.</td> </tr> <tr> <td style="padding: 2px;">Date Hand-delivered or Postmarked</td> <td style="padding: 2px;">2011 JUN 20 PM 4:09</td> </tr> <tr> <td style="padding: 2px;">Receipt #</td> <td style="padding: 2px;">Amount</td> </tr> <tr> <td style="padding: 2px;">Date Processed</td> <td style="padding: 2px;">09</td> </tr> <tr> <td style="padding: 2px;">Date Imaged</td> <td style="padding: 2px;"></td> </tr> </table>		OFFICE USE ONLY		Date Received	CITY CLERK DEPT.	Date Hand-delivered or Postmarked	2011 JUN 20 PM 4:09	Receipt #	Amount	Date Processed	09	Date Imaged	
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Date Processed	09														
Date Imaged															
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 513 W San Antonio, 6 E, P, TX 79901														
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 351 6861														
6 CAMPAIGN TREASURER NAME	MS / MRS / <input checked="" type="radio"/> MR FIRST MI <div style="text-align: center; font-size: 1.5em;">Jorge</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.5em;">Artalejo</div>														
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 513 W San Antonio, 6 E, P, TX 79901														
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 351 6861														
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Final report (Attach C/OH - FR)														
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 5 / 15 / 11 6 / 20 / 11														
11 ELECTION	ELECTION DATE Month Day Year 5 / 14 / 11	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special													
12 OFFICE	OFFICE HELD (if any) None	13 OFFICE SOUGHT (if known) None 8 th Council													
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> 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 N/A 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

Jorge Artalejo

16 ACCOUNT # (Ethics Commission Filers)

N/A

17 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.

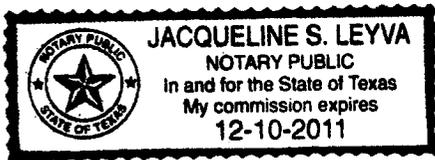
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		<i>N/A</i>
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

CITY CLERK DEPT.
2011 JUN 20 PM 4:10

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	<i>0</i>
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	<i>0</i>
3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	<i>0</i>
4. TOTAL POLITICAL EXPENDITURES	\$	<i>0</i>
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	<i>0</i>
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	<i>0</i>

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.

Jorge Artalejo
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Jorge Artalejo*, this the *20th* day of *June*, 20 *11*, to certify which, witness my hand and seal of office.

Jacqueline S. Leyva
Signature of officer administering oath

Jacqueline S. Leyva
Printed name of officer administering oath

Notary
Title of officer administering oath