

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

ORIGINAL 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:** 4

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX	Date Received	

TERRIE L. EVANS

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked
		DPina

904 TITRACKMORTON ST
MCKINNEY TX 75069

5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt #	Amount

(469) 247-9444

6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI	Date Processed
	NICKNAME LAST SUFFIX	Date Imaged

LUIS GARCIA

2.1.10
2.1.10

7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
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8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION
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9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR)

10 PERIOD COVERED	Month Day Year THROUGH Month Day Year
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1 / 16 / 2010 THROUGH 1 / 31 / 2010

11 ELECTION	ELECTION DATE	ELECTION TYPE
	Month Day Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special

3 / 2 / 2010

12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
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COLLIN COUNTY DISTRICT CLERK

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

COLLIN COUNTY
 ELECTIONS ADMINISTRATION
 10 FEB - 1 PM 3:20

CANDIDATE / OFFICEHOLDER REPORT **FORM C/OH**
SUPPORT & TOTALS **COVER SHEET PG 2**

ORIGINAL

15 C/OH NAME TERRY L EVANS 16 ACCOUNT # (Ethics Commission Filers)

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 NAME	N/A
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

COLLIN COUNTY ELECTIONS ADMINISTRATION
10 FEB - 1 PM 3:26

18 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)	\$ 8.00.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ -
	4. TOTAL POLITICAL EXPENDITURES	\$ 1000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 279.29
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ N/A

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.

Terry Evans
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Terry Evans, this the 15th day of February, 2010, to certify which, witness my hand and seal of office.

Deborah J Pina Deborah Pina Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

ORIGINAL

The Instruction Guide explains how to complete this form.		1 Total pages Schedule G:
2 FILER NAME TERRVE L. EVANS		3 ACCOUNT # (Ethics Commission filers)
4 Date 1/22/2010	5 Payee name CHRIS GANN / C-G GRAPHICS 6 Payee address; City; State; Zip Code 2725 FM 36 FARMERSVILLE, TX 75442 7 Purpose of expenditure (See instructions regarding type of information required.) POLITICAL SIGNS (If travel outside of Texas, complete Schedule T)	8 Amount (\$) 500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 1/27/2010	Payee name CHRIS GANN / C-G GRAPHIC Payee address; City; State; Zip Code 2725 FM 36 FARMERSVILLE, TX 75442 Purpose of expenditure (See instructions regarding type of information required.) POLITICAL SIGNS (If travel outside of Texas, complete Schedule T)	Amount (\$) 300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) TO FEB - 1 2010 COLLIN COUNTY ELECTIONS ADMINISTRATION <input type="checkbox"/> Reimbursement from political contributions intended
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES

ORIGINAL

SCHEDULE F

The Instruction Guide explains how to complete this form.	1 Total pages Schedule F:
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2 FILER NAME TERRY L. EVANS	3 ACCOUNT # (Ethics Commission filers)
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4 Date	5 Payee name CHRIS GANN / C-G Graphics	7 Amount (\$) 200.00
6 Payee address; City; State; Zip Code 2725 FM 36 N FARMERSVILLE, TX 75442		

8 Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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COLLIN COUNTY ELECTIONS ADMINISTRATION
 FEB - 1 PM 3:26

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED