

# 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:												
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: <i>Trustee</i> NICKNAME: <i>Trustee</i> FIRST: <i>Ran</i> LAST: <i>Price</i> MI: <i>5</i> SUFFIX:	<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%;">Date Received</td> <td style="width:50%; text-align: center;"> <i>2004 JUL 26 PM 7:11</i> </td> </tr> <tr> <td>Date Hand-delivered or Date Postmarked</td> <td></td> </tr> <tr> <td>Receipt #</td> <td>Amount</td> </tr> <tr> <td>Date Processed</td> <td></td> </tr> <tr> <td>Date Imaged</td> <td></td> </tr> </table>		OFFICE USE ONLY		Date Received	<i>2004 JUL 26 PM 7:11</i>	Date Hand-delivered or Date Postmarked		Receipt #	Amount	Date Processed		Date Imaged	
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Date Processed															
Date Imaged															
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: <i>3622 Jamaica</i> APT / SUITE #: <i>Dallas, TX 75210</i> CITY: STATE: ZIP CODE:														
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: <i>(214)</i> PHONE NUMBER: <i>428-4387</i> EXTENSION:														
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: <i>L.G. Christi</i> NICKNAME: <i>Sordani</i> FIRST: LAST: MI: SUFFIX:														
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): <i>4100 2nd Ave.</i> APT / SUITE #: <i>DLS TX</i> CITY: STATE: ZIP CODE: <i>75210</i>														
8 CAMPAIGN TREASURER PHONE	AREA CODE: <i>(214)</i> PHONE NUMBER: <i>428-4387</i> EXTENSION:														
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 (officer only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach COH - FR)														
10 PERIOD COVERED	Month Day Year: <i>1 / 15 / 04</i> THROUGH Month Day Year: <i>7 / 15 / 04</i>														
11 ELECTION	ELECTION DATE: Month Day Year: <i>1 / 1</i> ELECTION TYPE: <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special														
12 OFFICE	OFFICE HELD (if any): <i>Trustee Dist. 4</i>	13 OFFICE SOUGHT (if known):													
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: <i>[Signature]</i> Address / PO Box: Apt. / Suite #: City: State: Zip Code:														
GO TO PAGE 2															

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