

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:  2
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="checkbox"/>	FIRST <b>Elzha</b>	MI <b>L.</b>
	NICKNAME	LAST <b>Demarson</b>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #;	CITY;	STATE; ZIP CODE <b>P.O. Box 7690 Amarillo, Tx 79114</b>
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <b>(806)</b>	PHONE NUMBER <b>881.5194</b>	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/>	FIRST <b>Donald</b>	MI <b>E.</b>
	NICKNAME	LAST <b>Powell</b>	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>7211 Versailles Amarillo, Tx 79121</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE <b>(703)</b>	PHONE NUMBER <b>608-5941</b>	EXTENSION
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    Month Day Year <b>06 / 31 / 2016</b> THROUGH <b>12 / 31 / 2016</b>		
11 ELECTION	ELECTION DATE Month Day Year <b>05 / 09 / 2015</b>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	12 OFFICE OFFICE HELD (if any) <b>Amarillo City Council Place 1</b>	13 OFFICE SOUGHT (if known)	

**OFFICE USE ONLY**

Date Received  
**RECEIVED**  
**JAN 17 2017**

**CITY SECRETARY'S  
CITY OF AMARILLO**

Date Hand-delivered or Date Postmarked

Receipt #    Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Elisha L. Damerson 15 Filer ID (Ethics Commission Filers)

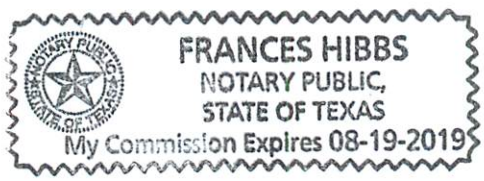
16 NOTICE FROM POLITICAL COMMITTEE(S)  
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME
<input checked="" type="checkbox"/> GENERAL	<u>Elisha Damerson for Amarillo City Council, Place 1</u>
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	<u>P.O. Box 7690, Amarillo, Tx 79114</u>
	COMMITTEE CAMPAIGN TREASURER NAME
	<u>Donald E. Powell</u>
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	<u>7211 Versailles, Amarillo, Tx 79121</u>

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	\$ <u>1,383.36</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

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.

Elisha L. Damerson  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elisha Damerson, this the 17 day of September, 20 17, to certify which, witness my hand and seal of office.

Frances Hibbs      Frances Hibbs      City Secretary  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath