

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 ACCOUNT #</b> (Ethics Commission filers)	<b>2 Total pages filed:</b>										
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR <i>MR</i>	FIRST <i>Michael</i>	MI <i>Paul</i>										
	NICKNAME	LAST <i>Harnisch</i>	SUFFIX										
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; <i>612 Lunar drive</i>	APT / SUITE #; <i>BORDET</i>	CITY; STATE; ZIP CODE <i>TEXAS 78611</i>										
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2">OFFICE USE ONLY</th> </tr> <tr> <td>Date Received</td> <td rowspan="2" style="text-align:center; vertical-align:middle;">                 2008 FEB - 11 PM 1:31                  FILED                  JAMES W. HARRIS                  COUNTY CLERK                  BURNET COUNTY, TEXAS             </td> </tr> <tr> <td>Date Hand-delivered or Date Postmarked</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	2008 FEB - 11 PM 1:31 FILED JAMES W. HARRIS COUNTY CLERK BURNET COUNTY, TEXAS	Date Hand-delivered or Date Postmarked	Receipt #	Amount	Date Processed		Date Imaged
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<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE <i>(512)</i>	PHONE NUMBER <i>715-9784</i>	EXTENSION										
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR <i>MR</i>	FIRST <i>Michael</i>	MI <i>P.</i>										
	NICKNAME	LAST <i>Harnisch</i>	SUFFIX										
<b>7 CAMPAIGN TREASURER ADDRESS (Residence or business)</b>	STREET ADDRESS (NO PO BOX PLEASE); <i>612 Lunar drive</i>	APT / SUITE #; <i>BORDET</i>	CITY; STATE; ZIP CODE <i>TEXAS 78611</i>										
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE <i>(512)</i>	PHONE NUMBER <i>715-9784</i>	EXTENSION										
<b>9 REPORT TYPE</b>	<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)												
<b>10 PERIOD COVERED</b>	Month Day Year <i>1 / 14 / 08</i>	THROUGH	Month Day Year <i>2 / 4 / 08</i>										
<b>11 ELECTION</b>	ELECTION DATE Month Day Year <i>3 / 4 / 08</i>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special											
	<b>12 OFFICE</b>	OFFICE HELD (if any)	<b>13 OFFICE SOUGHT (if known)</b> <i>Constable Pct 2 Burnet County</i>										
<b>14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS</b>  <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>None</i>												
	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 \_\_\_\_\_ 16 ACCOUNT # (Ethics Commission Filers) \_\_\_\_\_

17 NOTICE FROM POLITICAL COMMITTEE(S)

\*\* This box is for notice of political expenditures 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

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)

\$

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 542.77

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

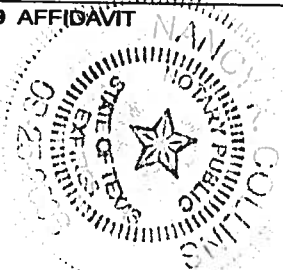
\$

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

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.

*Michael Hank*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mike Harnisch, this the 4<sup>th</sup> day of February 2008, to certify which, witness my hand and seal of office.

Nancy K. Collins Nancy K. Collins 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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:

2

2 FILER NAME

Michael P. Hurdisek

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

HOOPER BUILDING SUPPLY INC.

6 Payee address; City; State; Zip Code

500 EAST BURNET TX 78611  
PO BOX

8 Amount (\$)

\$54.27

Reimbursement from political contributions intended

7 Purpose of expenditure (See instructions regarding type of information required.)

POSTS TO PUT SIGNS UP - PURCHASED  
(If travel outside of Texas, complete Schedule T)

Date

Payee name

QUICK DRAW SIGNS

Payee address; City; State; Zip Code

102 BROOKS ST. BURNET TX 78611

Amount (\$)

92.50

Reimbursement from political contributions intended

Purpose of expenditure (See instructions regarding type of information required.)

10 = 18x24 SIGNS AND 22 = SIGN PATCHES  
(If travel outside of Texas, complete Schedule T)

Date

Payee name

QUICK DRAW SIGNS

Payee address; City; State; Zip Code

102 BROOKS ST. BURNET TX 78611

Amount (\$)

333.00

Reimbursement from political contributions intended

Purpose of expenditure (See instructions regarding type of information required.)

4 = 4'x8' SIGNS AND 10 = 18"x24" SIGNS  
(If travel outside of Texas, complete Schedule T)

Date

Payee name

DANA W PRINTING

Payee address; City; State; Zip Code

206 S. WATER BURNET, TX 78611

Amount (\$)

63.00

Reimbursement from political contributions intended

Purpose of expenditure (See instructions regarding type of information required.)

BUSINESS CARDS  
(If travel outside of Texas, complete Schedule T)

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 (\$)

Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED