CORRECTION/AMENDMENT AFFIDAVIT FOR FORM COR-PAC

| 1 | ACCOUNT # 2 Total Pages filed | | | | | | | OFFICE USED ONLY | | | |
|--|--|---|----------|----------|---------------|---------|-----------|------------------|------------------|-----------------|--|
| 3 | COMMITTEE NAME | Campaign for H | ouston | | | | | | Date Received | | |
| 4 | TREASURER NAME | First | | MI | | | LAST | | 10/24/2015 | | |
| Γ | | Larry M Hicks | | | | | | | | | |
| 5 | ORIGINAL | Date Hand-delivered or Date Postmarked | | | | | | | | Date Postmarked | |
| Γ | REPORT | January 15 | | Runoff | | | | | | | |
| | TYPE | | | | | | | | | | |
| | | July 15 10th day after campaign treasurer termination | | | | | | Receipt # | Amount | | |
| | | X 30th day before election Dissolution Report | | | | | | | Legal | Totals | |
| | 8th da before election Other (Specify) | | | | | | | _ | Date Processed | | |
| 6 | ORIGINAL PERIOD | Month | Day | Year | | Month | Day | Year | Date Imaged | | |
| ۲ | COVERED | ξ | 3/7/2015 | | THROUGH | | 9/24/2015 | | | | |
| 7 | EXPLANATION OF C | ORRECTION | | | | | | | | | |
| indicating that the schedule was not applicable. This Correction is to remove that "X" so that the Schedule F-4 information is visible and thereby and correct the error. 8 AFFIDAVIT | | | | | | | | | | | |
| I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. | | | | | | | | | | | |
| | Check ONLY if applicable: | | | | | | | | | | |
| Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. | | | | | | | | | | | |
| X Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. | | | | | | | | | | | |
| | Larry M. Hicks | | | | | | | | | | |
| | Signature of Campaign Treasurer | | | | | | | | | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | | | | | | | | | | | |
| | orn to and subscribed l | • | | | | | | | | day | |
| of, 20, to certify which, witness my hand and seal of office. | | | | | | | | | | | |
| Sig | nature of officer admin | istering oath | Print na | ame of o | fficer admini | stering | bath | Title o | f officer admini | stering oath | |
| Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections | | | | | | | | | | | |