

# CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 ACCOUNT # <b>00011038</b>		2 Total pages filed: <b>2</b>		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME <b>MS VERONICA QUINTANA</b>		MS / MRS / MR FIRST MI <b>R.</b>		Date Received	
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report		Date Hand-delivered or Date Postmarked	
5 ORIGINAL PERIOD COVERED		Month Day Year      THROUGH      Month Day Year <b>5/31/2007</b> <b>6/30/2007</b>		Receipt #      Amount Legal      Totals	
				Date Processed	
				Date Imaged	

6 EXPLANATION OF CORRECTION

*El forgot to include Rep. Holguin's in kind contribution on the report I filed earlier this morning, which was \$250<sup>00</sup> for phone banking.*

CITY CLERK DEPT  
17 JUL 16 PM 4:17

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

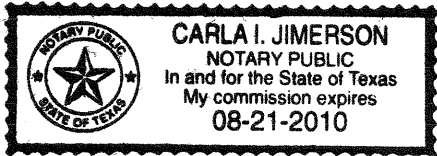
I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

*Veronica Quintana*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Veronica Quintana this the 14<sup>th</sup> day of July, 2007, to certify which, witness my hand and seal of office.

*Carla I. Jimerson*      Carla I. Jimerson      notary  
\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath



**Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections**

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME *Quintana, Veronica R.* 3 ACCOUNT # (Ethics Commission filers)  
*00011038*

4 Date <i>6/5/07</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Holquin, Eduardo Jr.</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable) <i>Phone Banking</i>
6 Contributor address; City; State; Zip Code <i>P.O. Box 17726 El Paso, TX 79917</i>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

CITY CLERK DEPT.  
07/11/07 16 PM 4:12