FORM COR-PAC

CORRECTION/AMENDMENT AFFIDAVIT

FC	OR POLITICAL COMMITTEE			
1 ACCOUNT#	2 Total pages filed: 1	OFFICE USE ONLY		
3 COMMITTEE The Committe 4 TREASURER Michael R. Le	e for Even Minimally Sane and Rational	Göverniment 2015 AG		
5 ORIGINAL REPORT TYPE July 15 Joly 15 30th day before ele	Runoff 10th day after campaign treasurer termination ction Dissolution Report	Date Hand-delivered or Postmarket		
8th day before elect	Other (specify	Receipt # Amount w		
6 ORIGINAL PERIOD Month Day COVERED 07 01	Year Month Day Year / 2014 THROUGH 12 / 31 / 2014	Date Imaged		
7 EXPLANATION OF CORRECTION	·			
The box noting it was a Jan	uary 15 report was not marked.			
8 AFFIDAVIT	l swear, or affirm, under penalty of perjury, t	that this corrected		
	report is true and correct.			
	Check ONLY if applicable:			
X	Semiannual reports: This report is an ar semiannual report due on or after Septe ment/correction is filed on or after the eig report was filed, I swear, or affirm, that the in good faith and without an intent to misle information contained in the report.	mber 1, 2011. If amend- hth day after the original original report was made		
PAM ELISE KELLER My Commission Expires December 23, 2018 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.				
AFFIX NOTARY STAMP / SEAL ABOVE	Signature of Camp	aign Treasurer		
Sworn to and subscribed before me, by the sa	id <u>Michael R. Levy</u> , this the <u>22</u>	day of <u>January</u> ,		
20 15 to certify which, withers my	hand and seal of office. Pam E. Keller	Notary Public		
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering path		

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

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

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The SPAC Instruction Guide explains how to complete this form. 1 ACCOUNT # (Ethics Commission Filers)			2 Total pages filed:	
3 COMMITTEE NAME			OFFICE USE ONLY	
The Committee for Even Minimally Sane and Rational Government		Date Received		
4 COMMITTEE ADDRESS	ADDRESS / PO BOX: APT / SUITE #: C Post Office Box 43, Austin, TX	TITY: STATE: ZIP CODE		
change of address			Date Hand-delivered or Postmarked	
•			Receipt# Amount	
5 CAMPAIGN TREASURER NAME	Mr. Michael R. Levy	MI	Date Processed	
	NICKNAME LAST	SUFFIX	Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUI 515 Congress, Suite 2375, A		ZIP CODE	
7 CAMPAIGN TREASURER'S MAILING ADDRESS change of address	STREET OR PO BOX; APT / SUI	TE#: CITY; STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 450-5100	EXTENSION		
9 REPORTTYPE		perfore election	Exceeded \$500 limit Dissolution (attach PAC-DR) 10th day after campaign treasurer termination	
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year	
11 ELECTION		ON TYPE		
	Month Day Year	Runoff	General Special	
GO TO PAGE 2				