

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

3847

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

5

3 CANDIDATE /
OFFICEHOLDER
NAME

TITLE FIRST MI
JOHN R
NICKNAME LAST SUFFIX
CUTRIGHT

OFFICE USE ONLY

Date Received

FILED
FEB 10 2 26 PM '98
TRAVIS COUNTY, TEXAS
COUNTY CLERK
DANIEL L. BROWN

4 CANDIDATE /
OFFICEHOLDER
ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE

P.O. Box 13184 AUSTIN TX 78711

Change of Address

5 CAMPAIGN
TREASURER
NAME

TITLE FIRST MI
JOHN W.
NICKNAME LAST SUFFIX
VAUGHT

Receipt #

HO / PM

Amount

Date Processed

Date Imaged

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE

P.O. Box 13184 AUSTIN, TX 78711 (BUSINESS)
6501 VAUGHT RANCH RD AUSTIN, TX 78730 (RESIDENCE)

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 502-1095

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach JC/OH - FR)

9 PERIOD
COVERED

Month Day Year MONTH DAY YEAR
01 / 02 / 98 THROUGH 01 / 29 / 98

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
03 / 10 / 98

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

JUDGE, COUNTY COURT AT LAW # 5

13 DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

** 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

Address / PO Box: Apt. / Suite #: City: State: Zip Code

additional pages

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2


14 C/OH NAME JOHN CUTRIGHT	15 ACCOUNT # (Ethics Commission filers)
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16 SUPPORTING POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	* This listing includes 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 <input type="checkbox"/> GENERAL	COMMITTEE NAME
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS


17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 1200.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1200.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ -0-
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1200.00

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.

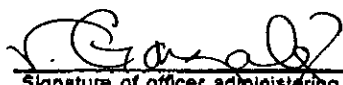


VICTORIA GONZALEZ
Notary Public, State of Texas
My Commission Expires
5-14-2001


 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said CANDIDATE, this the 9th day of February, 1998, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Victoria Gonzalez

 Print name of officer administering oath

Title of officer administering oath

LOANS (JUDICIAL)

SCHEDULE E (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule E(J): /
2 FILER NAME JOHN CUTRIGHT		3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$
5 Date of loan 2-02-98	7 Name of lender <input type="checkbox"/> out of state PAC JOHN CUTRIGHT	9 Loan Amount (\$) 1200.00
6 Is lender a financial institution? Y <input type="radio"/> N <input checked="" type="radio"/>	8 Lender address: City: State: Zip Code P.O. BOX 13184 AUSTIN, TX 78711	10 Interest rate - 0 -
		11 Maturity date 04-01-98
12 Lender's Principal Occupation ATTORNEY		13 Lender's Job Title N/A
14 Lender's Employer/Law Firm LAW OFFICE OF JOHN CUTRIGHT		15 Law Firm of lender's spouse (if any) N/A
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		
18 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	19 Name of guarantor N/A	21 Amount Guaranteed (\$)
	20 Guarantor address: City: State: Zip Code	
22 Guarantor's Principal Occupation		23 Guarantor's Job Title
24 Guarantor's Employer/Law Firm		25 Law Firm of guarantor's spouse (if any)
26 If guarantor is child, law firm of parent(s) (if any)		

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION Guide explains how to complete this form.		1 Total pages Schedule F: 1
2 FILER NAME JOHN CUTRIGHT		3 ACCOUNT # (Ethics Commission filers)
4 Date 2-02-98	5 Payee name TRAVIS CO. DEMOCRATIC PARTY 5 Payee address; City; State; Zip Code 1905 N. LAMAR AUSTIN, TX 78705 SUITE 101	7 Amount (\$) 1200.00
8 Purpose of expenditure FILING FEE		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

OUTSTANDING LOANS

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule L: 1
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2 FILER NAME JOHN CUTRIGHT	3 ACCOUNT # (Ethics Commission files)
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LENDER INFORMATION	4 Name of lender JOHN CUTRIGHT <hr/> 5 Lender address; City; State; Zip Code P.O. Box 13184 AUSTIN TX 78711
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GUARANTOR INFORMATION <input type="checkbox"/> not applicable	6 Name of guarantor <hr/> 7 Guarantor address; City; State; Zip Code
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LENDER INFORMATION	Name of lender <hr/> Lender address; City; State; Zip Code
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GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code
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LENDER INFORMATION	Name of lender <hr/> Lender address; City; State; Zip Code
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GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code
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LENDER INFORMATION	Name of lender <hr/> Lender address; City; State; Zip Code
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GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code
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