

CANDIDATE/OFFICEHOLDER CAMPAIGN FINANCE REPORT

3939

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT#
(Ethics Commission file#)

2 Total pages filed:

3 CANDIDATE/
OFFICEHOLDER
NAME

TITLE FIRST MI
NICKNAME LAST SUFFIX
Mary Parker
Hughes - Bass

OFFICE USE ONLY

4 CANDIDATE/
OFFICEHOLDER
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3110 Barton Point Dr.
Austin, Texas 78733

Change of Address

FILED
FEB 30 9 21 AM '98
COUNTY CLERK
TRAVIS COUNTY, TEXAS

6 CAMPAIGN
TREASURER
NAME

TITLE FIRST MI
NICKNAME LAST SUFFIX
Mary Parker
Hughes - Bass

Receipt amount
HD / PM
Date Processed

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
3110 Barton Point Dr.
Austin, Texas 78733

FILED
MAR 2 9 30 AM '98
COUNTY CLERK
TRAVIS COUNTY, TEXAS

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 263-8491

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 C/OH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
01 / 30 / 98 THROUGH *02 / 28 / 98*

10 ELECTION

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

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

*JUSTICE OF THE PEACE
DISTRICT 3*

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

None

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

additional pages

GOTOPAGE2

CANDIDATE/OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM COH
COVER SHEET PG 2

14 COHNAME *Mary Parker Hughes-Bass*

15 ACCOUNT # (Ethics Commission Use)

16 SUPPORTING POLITICAL COMMITTEE(S)

-- 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. --

None

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 NOREPORTABLE ACTIVITY

Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

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)

\$ *1718.50*

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ *1174.86*

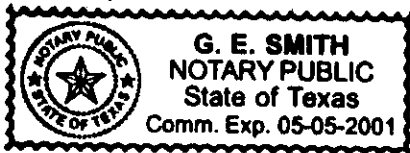
OUTSTANDING LOAN TOTALS

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

\$

19 AFFIDAVIT

I swear, or affirm, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Mary Parker Hughes-Bass
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP/SEAL ABOVE

Sworn to and subscribed before me, by the said *Mary Parker Hughes-Bass*, this the *1* day of *March*, 19 *98*, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

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		3 ACCOUNT # (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
1-30-98	<i>Ruth D. & John W. Gordan</i> 6 Contributor address; City; State; Zip Code <i>2506 Pebble Beach Dr. Austin, TX. 78747</i>	\$100.00	
9 Principal occupation <i>Retired Military</i>		10 Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
1-30-98	<i>Jim O. Boyce</i> Contributor address; City; State; Zip Code <i>10508 La Costa Dr. Austin, TX. 78747</i>	\$50.00	
Principal occupation <i>Steel</i>		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-2-98	<i>Robin B Mock Lambert</i> Contributor address; City; State; Zip Code <i>2101 IH 35 Suite 402 Austin, TX. 78741</i>	\$50.00	
Principal occupation <i>INSURANCE</i>		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
2-2-98	<i>Lois B Wayne Moran</i> Contributor address; City; State; Zip Code <i>2101 IH 35 South, Suite 204 Austin, TX. 78741</i>	\$250.00	
Principal occupation <i>Sales</i>		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
02-05-98	<i>Bernie Roy</i> Contributor address; City; State; Zip Code <i>1601 Rio Grande # 225 Austin, Texas 78701</i>	\$25.00	
Principal occupation <i>ATTORNEY</i>		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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 <i>Mary Parker Hughes Bass</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-5-98</i>	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>Thomas Prichard</i>	7 Amount of contribution (\$) <i>\$ 25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1300 Guadalupe # 110 AUSTIN, TX. 78701</i>			
9 Principal occupation <i>ATTORNEY</i>		10 Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Richard Davis</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1300 Guadalupe # 202 AUSTIN, TEXAS 78701</i>			
Principal occupation <i>ATTORNEY</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>GARY LAYELADY</i>	Amount of contribution (\$) <i>30.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>550 Beebeck Inn Rd. San Marcos, TX Laird Hill, Texas 75666</i>			
Principal occupation <i>CPA</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>JEANNETTE A. STUART KINOID</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>800 Brazos Street # 1010 AUSTIN, TEXAS 78701</i>			
Principal occupation <i>ATTORNEY</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>David Walberg</i>	Amount of contribution (\$) <i>\$ 25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>AUSTIN, TEXAS</i>			
Principal occupation <i>ATTORNEY</i>		Employer (optional)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

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2 FILER NAME <i>Mary Parker Hughes-Bass</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-5-98</i>	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>Pablo Rodriguez, Jr.</i>	7 Amount of contribution (\$) <i>\$75.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>7007 Gulf Freeway #238 Houston, Texas 77087</i>			
9 Principal occupation <i>Attorney</i>		10 Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Ralph Madad</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11200 Westheimer #400 Houston, TX 77042</i>			
Principal occupation <i>Attorney</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Michael F. McQuire</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2414 Exposition Blvd #0200 Austin, TX 78703</i>			
Principal occupation <i>Attorney</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Richard Whitmore</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10312 Shinneycock Hills Austin, TX 78747</i>			
Principal occupation <i>Attorney</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Glen Glen</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4703 Pinehurst Dr. South Austin, Texas 78747</i>			
Principal occupation <i>Retired</i>		Employer (optional)	

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**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 <i>Mary Parker Hughes-Boss</i>		3 ACCOUNT # (Ethics Commission files)	
4 Date <i>2-5-98</i>	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>Joyce Moore</i>	7 Amount of contribution (\$) <i>\$50.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>11107 CHAMPIONS LANE AUSTIN, TX 78747</i>			
9 Principal occupation <i>Retired</i>		10 Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>STEVEN D. KLAYMAN</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4315 S. 1ST STREET, SUITE 6 AUSTIN, TX 78745</i>			
Principal occupation <i>D.O.</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Daniel M. Giant</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3355 Bee Caves Rd Suite 103 AUSTIN, TEXAS 78746</i>			
Principal occupation <i>Attorney</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>John A. Lovelady</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7598 Cherry Chase # 103 AUSTIN, TEXAS 78752</i>			
Principal occupation <i>Computer Management</i>		Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>Dean Goodnight</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4700 Congress AUSTIN, TEXAS 78745</i>			
Principal occupation <i>Real Estate</i>		Employer (optional)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

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2 FILER NAME <i>MARY PARKER HUGHES-BASS</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-5-98</i>	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>JAMES A. SCHILLHOSE</i>	7 Amount of contribution (\$) <i>\$ 25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3109 BOITDA POINT DR. AUSTIN, TEXAS 78733</i>			
9 Principal occupation <i>CPA</i>		10 Employer (optional)	
Date <i>2-5-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>ELISIE F. CRAVER</i>	Amount of contribution (\$) <i>\$ 25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1302 WEST AVE AUSTIN, TX 78701</i>			
Principal occupation <i>Attorney</i>		Employer (optional)	
Date <i>2-9-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>GAIL A. LOVELADY</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>550 Beebeck Inn Rd. LORD HILL, TX 75666</i>			
Principal occupation <i>CPA</i>		Employer (optional)	
Date <i>2-15-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>BRYAN A. LOVELADY</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>9910 Michael Dale AUSTIN, TX 78736</i>			
Principal occupation <i>Banker</i>		Employer (optional)	
Date <i>2-16-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>BERT D. GARRETT, M.D.</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>9224 Spicebrush AUSTIN, TX 78759</i>			
Principal occupation <i>Physician</i>		Employer (optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME <i>MARY PARKER HUGHES-BASS</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2-23-98</i>	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>JEANETTE G. STUART KINARD</i>	7 Amount of contribution (\$) <i>\$ 300.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>800 BLAZOS, SUITE 1010 AUSTIN, TEXAS 78701</i>			
9 Principal occupation <i>ATTORNEY</i>		10 Employer (optional)	
Date <i>2-25-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>JOSE F. SANTIAGO A. LUISA L. POZON</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>9602 SCENIC BLUFF DR. AUSTIN, TEXAS 78733</i>			
Principal occupation <i>PHYSICIAN & CPA</i>		Employer (optional)	
Date <i>2-14-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>MRS. MCGUIRE</i>	Amount of contribution (\$) <i>\$ 23.50</i>	In-kind contribution description (if applicable) <i>IN KIND CONTRIBUTION OF A "WALKING LIST"</i>
Contributor address; City; State; Zip Code <i>12602 ORO VALLEY COVE AUSTIN, TX 78729</i>			
Principal occupation <i>Retired</i>		Employer (optional)	
Date <i>2-13-98</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>MARSHA SMITH</i>	Amount of contribution (\$) <i>\$ 40.00</i>	In-kind contribution description (if applicable) <i>IN KIND CONTRIBUTION OF MAILING LIST</i>
Contributor address; City; State; Zip Code <i>10604 PINEHURST DR AUSTIN, TEXAS 78747</i>			
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation		Employer (optional)	

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Mari Parker Hughes-Boss</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>2-5-98</i>	5 Payee name <i>AUSTIN'S World OF Rentals</i> 6 Payee address; City; State; Zip Code <i>3110 SOUTH Lamar AUSTIN, TEXAS 78704</i>	7 Amount (\$) <i>\$43.30</i>
8 Purpose of expenditure <i>50% OF RENTAL OF MICROPHONE FOR JOINT FUNDRAISER</i>		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date <i>2-5-98</i>	Payee name <i>Bobby Doyle</i> Payee address; City; State; Zip Code <i>5344 PINE CANYON DR. SMITHVILLE, TEXAS</i>	Amount (\$) <i>\$75.00</i>
Purpose of expenditure <i>50% OF FEE FOR ENTERTAINMENT AT JOINT FUNDRAISER.</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date <i>2-5-98</i>	Payee name <i>MATT'S EL Rancho</i> Payee address; City; State; Zip Code <i>2613 S. Lamar AUSTIN, TEXAS 78704</i>	Amount (\$) <i>\$374.75</i>
Purpose of expenditure <i>50% OF INVOICE FOR FOOD AT JOINT FUNDRAISER</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date <i>2-13-98</i>	Payee name <i>TRAVIS COUNTY Republican Party</i> Payee address; City; State; Zip Code <i>1300 W. Koenig, Suite 103 AUSTIN, TEXAS 78756</i>	Amount (\$) <i>\$100.00</i>
Purpose of expenditure <i>CAMPAIGN ADVERTISEMENT</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Mary Parker Hughes-Boss</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Payee name	7 Amount (\$)
<i>2-14-98</i>	<i>BARBARA ELLER'S RESTAURANT</i> 6 Payee address; City; State; Zip Code <i>13129 Highway 71 W Austin, Texas 78736</i>	<i>\$14.00</i>
8 Purpose of expenditure <i>BREAKFAST MEETING WITH MAC McGUIRE</i>		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Payee name	Amount (\$)
<i>2-18-98</i>	<i>FAST SIGNS</i> Payee address; City; State; Zip Code <i>3003 S. Lamar Austin, Texas</i>	<i>189.53</i>
Purpose of expenditure <i>Political Ad SIGNS</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Payee name	Amount (\$)
<i>2-25-98</i>	<i>FAST SIGNS</i> Payee address; City; State; Zip Code <i>3003 S. Lamar Austin, Texas</i>	<i>359.93</i>
Purpose of expenditure <i>Political Ad SIGNS</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Payee name	Amount (\$)
<i>2-26-98</i>	<i>FOX PHOTO</i> Payee address; City; State; Zip Code <i>701 Capitol of Texas Highway, Suite 8245- Westlake Hills, Texas 78746</i>	<i>\$ 20.00</i>
Purpose of expenditure		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held

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