

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

3 CANDIDATE / OFFICEHOLDER NAME

TITLE JUDGE FIRST GUY MI S. NICKNAME LAST HERMAN SUFFIX

OFFICE USE ONLY

Date Received

FILED Jul 9 4 59 PM '98

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE P. O. BOX 2561 AUSTIN, TEXAS 78767

Change of Address

5 CAMPAIGN TREASURER NAME

TITLE FIRST MARTHA MI NICKNAME LAST DICKIE SUFFIX

Receipt #

HD / 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 1100 GUADALUPE AUSTIN TEXAS 78701

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION (512) 478-4873

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 01 / 01 / 98 THROUGH Month Day Year 06 / 30 / 98

10 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any) PROBATE JUDGE

12 OFFICE SOUGHT (if known)

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 JUDGE GUY HERMAN	15 ACCOUNT # (Ethics Commission filers)
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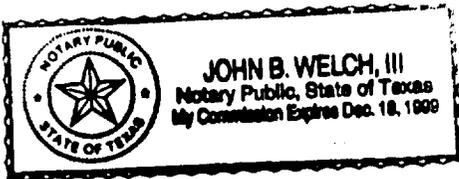
16 SUPPORTING POLITICAL COMMITTEE(S)	- This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **	
	<input type="checkbox"/> GENERAL	COMMITTEE NAME
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 50.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3700.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 70.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1958.89
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20324.94
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ -0-

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.



Guy Herman
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said GUY HERMAN this the day of JULY

19 98, to certify which, witness my hand and seal of office.

John B. Welch III John B. Welch III NOTARY
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A(J) 3	
2 FILER NAME JUDGE GUY HERMAN		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/2/98	5 Full name of contributor <input type="checkbox"/> out of state PAC Eric B. Tucker, P.C.	7 Amount of contribution (\$) \$400.00	8 In-kind contribution description(if applicable)
6 Contributor address, City, State, Zip Code 1250 Capital of Texas Highway South Building III, Suite 340 Austin, Texas 78746			
9 Contributor's principal occupation Attorney		10 Contributor's job title	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 2/2/98	Full name of contributor <input type="checkbox"/> out of state PAC Osborne, Lowe, Helman & Smith, L.L.P.	Amount of contribution (\$) \$1000.00	In-kind contribution description(if applicable)
Contributor address, City, State, Zip Code 301 Congress Avenue, Suite 1900 Austin, Texas 78701			
Contributor's principal occupation Lawfirm		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 2/27/98 4/10/98	Full name of contributor <input type="checkbox"/> out of state PAC Richard Thormann	Amount of contribution (\$) \$500.00	In-kind contribution description(if applicable)
Contributor address, City, State, Zip Code 805 West 10th, Suite 100 Austin, Texas 78701			
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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 (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A(J) 3	
2 FILER NAME JUDGE GUY HERMAN		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/11/98	5 Full name of contributor Clark, Thomas & Winters <input type="checkbox"/> out of state PAC 6 Contributor address: City: State: Zip Code P. O. Box 1148 Austin, Texas 78767	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Lawfirm		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 6/18/98	Full name of contributor Patricia T. Barnes <input type="checkbox"/> out of state PAC Contributor address: City: State: Zip Code 2901 Bee Caves Road, Box D Austin, Texas 78746-5570	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Barnes & Karisch, P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 6/18/98	Full name of contributor Barbara J. Lipscomb <input type="checkbox"/> out of state PAC Contributor address: City: State: Zip Code 1300 Woodlawn Blvd., Apt. 201 Austin, Texas 78703-3941	Amount of contribution (\$) \$ 150.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Barnes & Karisch, P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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 (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A(J) 3	
2 FILER NAME JUDGE GUY HERMAN		3 ACCOUNT # (Ethics Commission files)	
4 Date 6/19/98	5 Full name of contributor <input type="checkbox"/> out of state PAC Glenn & Suzanne Karisch	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address, City, State, Zip Code 1711 West 32nd Street Austin, Texas 78703			
9 Contributor's principal occupation Attorney		10 Contributor's job title	
11 Contributor's employer/law firm Barnes & Karisch, P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 6/19/98	Full name of contributor <input type="checkbox"/> out of state PAC John R. Ott	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address, City, State, Zip Code 6324 Clarion Drive Austin, Texas 78749			
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Barnes & Karisch, P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 6/24/98	Full name of contributor <input type="checkbox"/> out of state PAC BM & OH Electo-Pac	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address, City, State, Zip Code 111 Congress Avenue, Suite 1400 Austin, Texas 78701			
Contributor's principal occupation Lawfirm		Contributor's job title	
Contributor's employer/law firm Brown McCarroll & Oaks Hartline, L.L.P.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			



PLEGGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule B(J)
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2 FILER NAME JUDGE GUY HERMAN	3 ACCOUNT # (Ethics Commission files)
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4 TOTAL OF UNITEMIZED PLEDGES: ⇄ ⇄ ⇄ ⇄ ⇄ ⇄ ⇄ ⇄ \$

5 Date	6 Full name of pledgor <input type="checkbox"/> out of state PAC	8 Amount of pledge (\$)	9 In-kind description (if applicable)
	7 Pledgor address, City, State, Zip Code		

10 Pledgor's principal occupation	11 Pledgor's job title
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12 Pledgor's employer/law firm	13 Law firm of pledgor's spouse (if any)
--------------------------------	--

14 If pledgor is a child, law firm of parent(s) (if any)

Date	Full name of pledgor <input type="checkbox"/> out of state PAC	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address, City, State, Zip Code		

Pledgor's principal occupation	Pledgor's job title
--------------------------------	---------------------

Pledgor's employer/law firm	Law firm of pledgor's spouse (if any)
-----------------------------	---------------------------------------

If pledgor is a child, law firm of parent(s) (if any)

Date	Full name of pledgor <input type="checkbox"/> out of state PAC	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address, City, State, Zip Code		

Pledgor's principal occupation	Pledgor's job title
--------------------------------	---------------------

Pledgor's employer/law firm	Law firm of pledgor's spouse (if any)
-----------------------------	---------------------------------------

If pledgor is a child, law firm of parent(s) (if any)

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

LOANS (JUDICIAL)**SCHEDULE E (J)**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E(J):

1

2 FILER NAME

JUDGE GUY HERMAN

3 ACCOUNT # (Ethics Commission filers)**4**

TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan**7** Name of lender out of state PAC**9** Loan Amount (\$)**6** Is lender a financial institution?

Y N

8 Lender address. City. State. Zip Code**10** Interest rate**11** Maturity date**12** Lender's Principal Occupation**13** Lender's Job Title**14** Lender's Employer/Law Firm**15** Law Firm of lender's spouse (if any)**16** If lender is child, law firm of parent(s) (if any)**17** Description of Collateral none**18** GUARANTOR INFORMATION**19** Name of guarantor**21** Amount Guaranteed (\$) not applicable**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

2

2 FILER NAME

JUDGE GUY HERMAN

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/31/98

5 Payee name

American Printers Exchange

7 Amount
(\$)

\$401.61

6 Payee address, City, State, Zip Code

603 Canion Street
Austin, Texas 78752

8 Purpose of expenditure

Stationery

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

4/13/98

Payee name

IRS

Amount
(\$)

\$241.06

6/8/98

Payee address, City, State, Zip Code

Austin, Texas 78333

Purpose of expenditure

1120-POL Tax Return

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

5/28/98

Payee name

Texas Bar Foundation

Amount
(\$)

\$200.00

Payee address, City, State, Zip Code

P. O. Box 12487
Austin, Texas 78711

Purpose of expenditure

Foundation pledge

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

6/22/98

Payee name

Circuit City

Amount
(\$)

\$308.50

Payee address, City, State, Zip Code

Austin, Texas 78759

Purpose of expenditure

Refrigerator for office

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL
EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 2
2 FILER NAME JUDGE GUY HERMAN		3 ACCOUNT # (Ethics Commission filers)
4 Date 1/21/98	5 Payee name Volunteer Legal Services 6 Payee address: City: State: Zip Code 700 Lavaca, Suite 603 Austin, Texas 78701	7 Amount (\$) \$100.00
8 Purpose of expenditure Donation		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 1/21/98	Payee name Travis County Bar Association Payee address: City: State: Zip Code P. O. Box 12487 Austin, Texas 78711	Amount (\$) \$122.50
Purpose of expenditure Bar and Section Dues		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 1/21/98	Payee name Senfronia Thompson Campaign Committee Payee address: City: State: Zip Code 7611 Sterlingshire Houston, Texas 77016	Amount (\$) \$100.00
Purpose of expenditure Campaign Contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 3/11/98	Payee name Crown Portraits Payee address: City: State: Zip Code c/o Travis County Bar Association P. O. Box 12487 Austin, Texas 78711	Amount (\$) \$485.22
Purpose of expenditure Judicial photographs		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G

1

2 FILER NAME

JUDGE GUY HERMAN

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address: City, State, Zip Code	
	7 Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name	Amount (\$)
	Payee address: City, State, Zip Code	
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name	Amount (\$)
	Payee address: City, State, Zip Code	
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name	Amount (\$)
	Payee address: City, State, Zip Code	
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name	Amount (\$)
	Payee address: City, State, Zip Code	
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule H 1
2 FILER NAME JUDGE GUY HERMAN		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Business name 6 Business address; City, State, Zip Code	7 Amount (\$)
8 Purpose of payment		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Business name Business address; City, State, Zip Code	Amount (\$)
Purpose of payment		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Business name Business address; City, State, Zip Code	Amount (\$)
Purpose of payment		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date	Business name Business address; City, State, Zip Code	Amount (\$)
Purpose of payment		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule I:

1

2 FILER NAME

JUDGE GUY HERMAN

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City, State, Zip Code	
	7 Purpose of expenditure	

Date	Payee name	Amount (\$)
	Payee address; City, State, Zip Code	
	Purpose of expenditure	

Date	Payee name	Amount (\$)
	Payee address; City, State, Zip Code	
	Purpose of expenditure	

Date	Payee name	Amount (\$)
	Payee address; City, State, Zip Code	
	Purpose of expenditure	

Date	Payee name	Amount (\$)
	Payee address; City, State, Zip Code	
	Purpose of expenditure	

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CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule K:

1

2 FILER NAME

JUDGE GUY HERMAN

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Payor name	8 Amount (\$)
	6 Payor address: City, State, Zip Code	
	7 Reason for credit	
	Payor name	Amount (\$)
	Payor address: City, State, Zip Code	
	Reason for credit	
	Payor name	Amount (\$)
	Payor address: City, State, Zip Code	
	Reason for credit	
	Payor name	Amount (\$)
	Payor address: City, State, Zip Code	
	Reason for credit	
	Payor name	Amount (\$)
	Payor address: City, State, Zip Code	
	Reason for credit	

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

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

JUDGE GUY HERMAN

LENDER INFORMATION

4 Name of lender

5 Lender address; City; State; Zip Code

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

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ASSETS VALUED AT \$500 OR MORE

SCHEDULE M

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule M

1

2 FILER NAME

JUDGE GUY HERMAN

3 ACCOUNT # (Ethics Commission filers)

4 Description of Asset

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