

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

4248

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME

TITLE FIRST MI
JUDGE JAN
NICKNAME LAST SUFFIX
BRELAND

OFFICE USE ONLY

Date Received

FILED
JAN 15 1 07 PM '99
COUNTY CLERK
TRAVIS COUNTY, TEXAS

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE
P.O. Box 1748 Austin, Texas 78701

Change of Address

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI
RANDY T.
NICKNAME LAST SUFFIX
LEAVITT

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) 476-4873

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 C/OH - FR)

9 PERIOD COVERED

Month Day Year Month Day Year
11 / 27 / 98 THROUGH 01 / 13 / 99

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
/ / Primary Runoff General Special

11 OFFICE

OFFICE HELD (# any)
County Court at Law No. 6

12 OFFICE SOUGHT (# 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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission filers)

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. ..

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

17 NO REPORTABLE
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	\$ -0-
---	--------

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$7,835.00
--	------------

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ -0-
--	--------

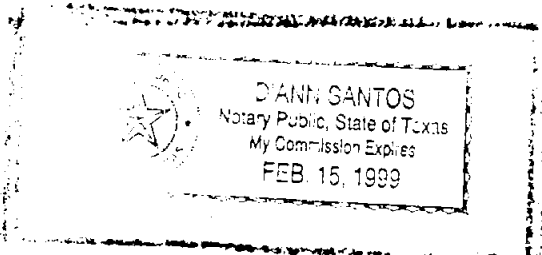
4. TOTAL POLITICAL EXPENDITURES	\$6,752.72
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OUTSTANDING
LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$23,046.31
---	-------------

19 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.



[Handwritten Signature]

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jaw Brekend this the 15th day of January 19 99, to certify which, witness my hand and seal of office.

[Handwritten Signature]

 Signature of officer administering oath

D'Ann Santos

 Print name of officer administering oath

Notary

 Title of officer administering oath

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 FIRST MI NICKNAME LAST SUFFIX	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address		Date Received	
ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE			
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI NICKNAME LAST 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		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ()		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach JC/OH - FR)		
9 PERIOD COVERED	Month / Day / Year THROUGH Month / Day / Year		
10 ELECTION	ELECTION DATE Month / Day / Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	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		
<input type="checkbox"/> additional pages			

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM JC/OH
COVER SHEET PG 2**

14 C/OH NAME	15 ACCOUNT # (Ethics Commission files)
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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 <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		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	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 19_____, 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:

See Attached List

2 FILER NAME

JUDGE DAN BARRAN

3 ACCOUNT # (Ethics Commission files)

4 Date

5 Full name of contributor

out of state PAC

7 Amount of contribution (\$)

8 In-kind contribution description(if applicable)

6 Contributor address; City; State; Zip Code

9 Principal occupation

10 Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

Employer (optional)

Date

Full name of contributor

out of state PAC

Amount of contribution (\$)

In-kind contribution description(if applicable)

Contributor address; City; State; Zip Code

Principal occupation

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.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule B: <u>1</u>
2 FILER NAME <i>Judge JAW BALLAND</i>	3 ACCOUNT # (Ethics Commission filers)

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 Principal occupation	11 Employer (optional)
-------------------------	------------------------

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			

Principal occupation	Employer (optional)
----------------------	---------------------

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			

Principal occupation	Employer (optional)
----------------------	---------------------

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			

Principal occupation	Employer (optional)
----------------------	---------------------

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			

Principal occupation	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.

Contributions January 14, 1999

Ayres, Patricia Shield
5705 Scout Island Cove
Austin, TX. 78731
\$100.00
10/23/98

Barrow, Perry
Attorney at Law
12710 Research Blvd., Suite 380
Austin, TX. 78759
\$150.00
10/14/98

Bell, Henry N.
1408 Church
P.O. Box H
Bastrop, TX. 78602
\$200.00
10/16/98

Bell, Hubert
515 Congress Ave.
2000 NationsBank Tower
Austin, TX. 78701
\$100.00
10/21/98

Best and Associates
P.O. Box 500167
Austin, TX. 78750
\$100.00
10/23/98

Campbell, John F.
805 W. 10th, Suite 400
Austin, TX. 78701
\$100.00
10/14/98

Case, C. Bryan
6201 Hill Forest Dr.
Austin, TX. 78749
\$75.00
10/21/98

Cavness, John D.
2202 Southern Oaks
Austin, TX. 78745
\$25.00
10/22/98

Clark, Bruce H.
8903 Split Oak Cir.
Austin, TX. 78759
\$50.00
11/03/98

Clinton, Sam Houston
500 West 7th St.
Austin, TX. 78701
\$25.00
10/15/98

Collins, Richard C.
Attorney at Law
1621 W. 6th St.
Austin, TX. 78703
\$100.00
11/02/98

Corsbie, Bill
3708 Clawson Rd.
Austin, TX. 78704
\$25.00
10/21/98

Corsbie, Bill
3708 Clawson Rd.
Austin, TX. 78704
\$15.00
10/28/98

Clawan, Elsie F.
1112 Cripple Creek Dr.
Austin, TX. 78758
\$50.00
10/22/98

Davis, Beth C.
606 Meadow Creek Drive
Pflugerville, TX. 78660
\$50.00
10/23/98

Denkler, Ann
1702 Mohle Dr.
Austin, TX. 78703
\$100.00
10/28/98

Dunham Law Firm
Attorneys at Law
400 W. 15th St. Ste. 1410
Austin, TX. 78701
\$250.00
10/27/98

Dwyer, Edward M.
AT&T
\$25.00
10/26/98

Ely, Joan A.
Attorney at Law
1302 West Ave.
Austin, TX. 78701
\$50.00
10/30/98

Feaster, Bob
P.O. Box 140543
Austin, TX. 78714
\$25.00
10/21/98

Foerster, Frank
Attorney at Law
1012 Rio Grande
Austin, TX. 78701
\$100.00
10/21/98

Gammon, William B.
P.O. Box 684868
Austin, TX. 78768-4868
\$50.00
10/28/98

Garvey, Bonita M.
3909 Balcones Dr.
Austin, TX. 78731
\$500.00
10/16/98

Girling Political Action Committee
P.O. Box 4294
Austin, TX. 78765
\$200.00
10/21/98

Guirard, Beverly M.
8313 Summer Place Drive
Austin, TX. 78759-8220
\$20.00
10/22/98

Guthrie, Carl
2107 Klattenhoff Dr.
Austin, TX. 78728-5406
\$25.00
12/01/98

Hall, Jimmy Alan
4202 Cat Hollow Dr.
Austin, TX. 78731-2004
\$10.00
11/22/98

Harris, Michael L.
P.O. Box 50303
Austin, TX. 78763
\$500.00
10/24/98

Hineman, Charles M.
Attorney at Law
1300 Guadalupe Suite 110
Austin, TX. 78701-1650
\$50.00
10/20/98

Hines, William M.
Attorney at Law
1304 San Antonio, Ste. 201
Austin, TX. 78756
\$100.00
10/26/98

Icenhauer - Ramirez, Robert
1103 Nueces St.
Austin, TX. 78701-2105
\$250.00
10/31/98

Jacks, Tommy
111 Congress Ave., Suite 1010
Austin, TX. 78701-4043
\$500.00
10/30/98

Kiester & Lockwood
611 West 14th Street, Suite 100
Austin, TX. 78701
\$100.00
10/22/98

Klippel, Scott
Attorney at Law
1002 Rio Grande
Austin, TX. 78701
\$100.00
10/28/98

Knight, Robert
307 East Second Street
Austin, TX. 78701
\$50.00
11/02/98

Kucera, Gerald
8408 Emerald Hill Dr.
Austin, TX. 78759
\$300.00
10/29/98

Lavergne, Teresa A.
7401 Lunar Drive
Austin, TX. 78745
\$15.00
10/25/98

Leeth, Wynnelle
3200 South First St. #1015
Austin, TX. 78704
\$15.00
10/23/98

Leitner, Sandra
Austin, TX. 78759
\$25.00
10/26/98

Levbarg, Mark Z.
Fountain Plaza, Bldg. B
825 E. 53- 1/2 St.
Austin, TX. 78751
\$50.00
11/06/98

Lione & Lee
8303 N. Mopac Expwy. Bldg. C Ste. 238
Austin, TX. 78759
\$100.00
11/03/98

Lopez, Miguel Z.
12309 Wipple Tree Cove
Austin, TX. 78750-1756
\$25.00
10/20/98

McCarthy, Donald J.
2603 Park View Dr.
Austin, TX 78757
\$40.00
10/16/98

Niemeyer, E. V.
1100 Crystal Creek Drive
Austin, TX. 78746
\$15.00
10/20/98

O'Conner, Jim
Auto Service
1308 Lavaca St.
Austin, TX. 78701-1633
\$50.00
10/21/98

Onstad Law Firm
Attorneys at Law
907 Ranch Road 620 South, Suite 302
Austin, TX. 78734-5609
\$1000.00
10/23/98

Oswald, Karen M.
1411 Butternut Place
Cedar Park, TX. 78613
\$50.00
10/22/98

Patterson, Fred S.
3700 Branigan Lane
Austin, TX. 78759
\$100.00
10/09/98

Persinger, Michael R.
1804 Intervail
Austin, TX. 78746
\$500.00
10/15/98

Reynolds, David H.
Attorney at Law
1012 Rio Grande
Austin, TX. 78701
\$200.00
10/26/98

Rodgers, Gary R.
8911 Capital of Texas Hwy 2210
Austin, TX. 78759
\$100.00
11/02/98

Rumsey, Sheri Casey
8111 Matchlock Cove
Austin, TX. 78729
\$25.00
10/15/98

Salter, Charlotte
9804 Lajolla
Austin, TX. 78733
\$50.00
10/16/98

Schilz, Virginia Koch
3616 Claburn Dr.
Austin, TX. 78759
\$50.00
10/25/98

Schreiber, Mark B.
1002 Yaupon Valley Rd.
Austin, TX. 78746
\$100.00
10/29/98

Shelton, Polk
Attorney at Law
611 W. 14th Street
Austin, TX. 78701
\$65.00
10/20/98

Smith and Silberstein
3304 Cherry Tree Circle
Austin, TX. 78731
\$50.00
10/28/98

Smith, Robert Earl
Attorney at Law
1108 Nueces Street
Austin, TX. 78701
\$100.00
10/23/98

Smith, Scott C.
1304 Nueces
Austin, TX. 78701
\$100.00
11/02/98

Spillar Investments
P.O. Box 340090
Austin, TX. 78734
\$100.00
10/19/98

Studak, Joseph
3204 Benbrook Dr.
Austin, TX. 78757
\$50.00
10/25/98

Sullivan, Susan Marie
21 Timbercrest Dr.
San Marcos, TX. 78666
\$20.00
10/19/98

Tiemann, Robert M.
P.O. Box 1190
Pflugerville, TX. 78791
\$100.00
10/19/98

Tisdale, Hope
1907 Arthur Lane
Austin, TX. 78704-3233
\$15.00
10/20/98

Trull, Louise H.
1210 West Ave.
Austin, TX. 78701-1714
\$25.00
10/22/98

Velte, Paul C.
Attorney at Law
1300 Guadalupe, Suite 202
Austin, TX. 78701
\$25.00
10/29/98

White, Janice
2902 White Rock Dr.
Austin, TX. 78757
\$25.00
10/19/98

Wilger, Steven T.
119 Central Avenue
Elgin, TX. 78621
\$20.00
10/29/98

Willms & Associates
1101 Capital of Texas Highway, Bldg. H, Ste. 105
Austin, TX. 78746
\$100.00
10/19/98

Wucher, Zelma N.
2717 Geraghty Ave.
Austin, TX. 78757-2329
\$25.00
10/20/98

Yarnell, Brande Camp
7708 Kincheon Ct.
Austin, TX. 78749
\$10.00
10/21/98

Ziegler, Mary Alice
6704 Shoal Creek
Austin, TX. 78757-4379
\$25.00
10/24/98

rtl a:\contributions - october 5, 1998.doc

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

127

2 FILER NAME

JUDGE JAN BARBAND

3 ACCOUNT # (Ethics Commission filers)

4 Date

10/30/98

5 Payee name

TEBI Overfest

7

Amount (\$)

340.00

6 Payee address: City: State: Zip Code

1310 Nueces #100
Austin, TX 78701

8 Purpose of expenditure

LABOR

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

11/1/98

Payee name

JUDY BATHAIN

Amount (\$)

350.00

Payee address: City: State: Zip Code

1813 Santa Anna
Austin, TX 78757

Purpose of expenditure

Reimburse - Office

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

11/1/98

Payee name

CASH

Amount (\$)

250.00

Payee address: City: State: Zip Code

Purpose of expenditure

Petty CASH

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

11/1/98

Payee name

NEB

Amount (\$)

203.89

Payee address: City: State: Zip Code

Austin, Texas

Purpose of expenditure

GRADUATES

-- 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:

3 of 4

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

Judge Jon Baerham

4 Date

5 Payee name

7 Amount (\$)

11/13/98

Judy Brittain

2500.00

6 Payee address, City, State, Zip Code

1813 SANTA ANNA
Austin, TX 78757

8 Purpose of expenditure

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Consultant

Date

Payee name

Amount (\$)

12/14/98

Worley Printing

281.75

Payee address, City, State, Zip Code

Austin, TX

Purpose of expenditure

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Printing

Date

Payee name

Amount (\$)

12/16/98

Southwestern Bell

310.13

Payee address, City, State, Zip Code

Austin, TX

Purpose of expenditure

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Telephone

Date

Payee name

Amount (\$)

12/16/98

MCI WorldCom

46.20

Payee address, City, State, Zip Code

Austin, TX

Purpose of expenditure

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Telephone

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 of 4

2 FILER NAME

Judge JAN BREZANI

3 ACCOUNT # (Ethics Commission filers)

4 Date

11/3/98

5 Payee name

DAN'S

7 Amount (\$)

259.05

6 Payee address: City: State: Zip Code

Austin, TX

8 Purpose of expenditure

Supplies

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

Date

11/3/98

Payee name

TRANS County CLERK

Amount (\$)

55.00

Payee address: City: State: Zip Code

Austin, TX

Purpose of expenditure

Filing

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

Date

11/6/98

Payee name

BREXHAM COCHRAN

Amount (\$)

1798.16

Payee address: City: State: Zip Code

1210 Nueces #100
Austin, TX 78701

Purpose of expenditure

LABOR & Mileage

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

Date

11/6/98

Payee name

TEAL BORTHAIN

Amount (\$)

200.00

Payee address: City: State: Zip Code

1210 Nueces #100
Austin, TX 78701

Purpose of expenditure

LABOR

-- 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:

4 OF 4

2 FILER NAME

Judge Tom Brazand

3 ACCOUNT # (Ethics Commission files)

4 Date

12/16/98

5 Payee name

A T & T

6 Payee address,

City, State, Zip Code

Austin, TX

7

Amount (S)

4.35

8 Purpose of expenditure

Telephone

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

12/31/98

Payee name

Southwestern Bell

Payee address,

City, State, Zip Code

Austin, TX

Amount (S)

154.49

Purpose of expenditure

Telephone

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

Payee name

Payee address;

City, State, Zip Code

Amount (S)

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 (S)

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

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 JAN BAELAND

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 JAN BALLARD

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Business name

7 Amount (\$)

6 Business address; City; State; Zip Code

8 Purpose of payment

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

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment

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

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment

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

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment

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

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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 JAN BALDWIN

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

8

Amount
(S)

6 Payee address; City: State: Zip Code

7 Purpose of expenditure

Date

Payee name

Amount
(S)

Payee address; City: State: Zip Code

Purpose of expenditure

Date

Payee name

Amount
(S)

Payee address; City: State: Zip Code

Purpose of expenditure

Date

Payee name

Amount
(S)

Payee address; City: State: Zip Code

Purpose of expenditure

Date

Payee name

Amount
(S)

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:

2 FILER NAME

JUDGE TAN BAELAND

3 ACCOUNT # (Ethics Commission filers)

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

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 OF 2

2 FILER NAME

Judge John Baughman

3 ACCOUNT # (Ethics Commission files)

4 TOTAL OF UNITEMIZED LOANS:

0 0 0 0 0 0

\$

5 Date of loan

3/1/98

7 Name of lender

JANA LIPSCOMB

out of state PAC

9 Loan Amount (\$)

5000.00

6 Is lender a financial institution?

Y

8 Lender address, City, State, Zip Code

8256 SUMMERSIDE DR.
AUSTIN, TX 78759

10 Interest rate

11.26%

11 Maturity date

3/1/01

12 Description of Collateral

none

13 GUARANTOR INFORMATION

14 Name of guarantor

16 Amount Guaranteed (\$)

not applicable

15 Guarantor address, City, State, Zip Code

17 Principal Occupation

18 Employer

Date of loan

3/1/98

Name of lender

TRAVIS COUNTY CREDIT UNION

out of state PAC

Loan Amount (\$)

10,368.16

Is lender a financial institution?

Y

Lender address, City, State, Zip Code

1101 N. I.H. 35
AUSTIN, TX 78702

Interest rate

8.10%

Maturity date

12/31/02

Description of Collateral

none

1994 JEEP GRAND CHEROKEE

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address, City, State, Zip Code

Principal Occupation

Employer

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

