

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**
4367
**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 W. JEANNE	MI
	NICKNAME MEURER	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX	APT / SUITE #	CITY STATE ZIP CODE
	4502 Spanish Oak Trail, Austin, Texas 78731		
5 CAMPAIGN TREASURER NAME	TITLE JUDGE	FIRST W. JEANNE	MI
	NICKNAME MEURER	LAST	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE)		APT / SUITE # CITY STATE ZIP CODE
	4502 Spanish Oak Trail		Austin, Texas 78731
	7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER EXTENSION
	(512)	467-7588	
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 checked="" 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
	1	01	99
	THROUGH	Month	Day
		6	30
	Year	Year	
		99	
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	/	/	
			<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)
	JUDGE, 98th District Court		
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	.. 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		

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS **FORM JC/OH COVER SHEET PG 2**

14 C/OH NAME JUDGE W. JEANNE MEURER **15 ACCOUNT #** (Ethics Commission files)

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"/> additional pages	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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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	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,505.19
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	\$ -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.



 Signature of Candidate or Officeholder

 W. JEANNE MEURER

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said W. JEANNE MEURER this the 15th day of July 19 99, 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 EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME W. JEANNE MEURER		3 ACCOUNT # (Ethics Commission filers)
4 Date 1/14/99	5 Payee name SERRANOS 6 Payee address: City, State, Zip Code	7 Amount (\$) 698.23
8 Purpose of expenditure Appreciation Dinner		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date 3/23/99	Payee name RCL Portrait Design Payee address: City, State, Zip Code	Amount (\$) 156.96
Purpose of expenditure Floppy Disk - Picture Film Negative		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date 3/31/99	Payee name Central Austin Democratic Party Payee address: City, State, Zip Code	Amount (\$) 100.00
Purpose of expenditure David Butts Roast Sponsorship		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held
Date 5/4/99	Payee name Cinco de Mayo Celebration Payee address: City, State, Zip Code	Amount (\$) 25.00
Purpose of expenditure Sponsorship		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought / held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

LOANS (JUDICIAL)

SCHEDULE E (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule E(J):	
2 FILER NAME		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED LOANS: ◊ ◊ ◊ ◊ ◊ ◊			\$
5 Date of loan	7 Name of lender <input type="checkbox"/> 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 Matunty date
12 Lender's Pncipal Occupation		13 Lenders Job Title	
14 Lender's Employer/Law Frm		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 <input type="checkbox"/> none			
18 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	19 Name of guarantor		21 Amount Guaranteed (\$)
	20 Guarantor address: City: State: Zip Code		
22 Guarantor's Pncipal Occupation		23 Guarantor's Job Title	
24 Guarantor's Employer/Law Frm		25 Law Firm of guarantor's spouse (if any)	
26 If guarantor is child, law firm of parent(s) (if any)			

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 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 FILER NAME

W. JEANNE MEURER

3 ACCOUNT # (Ethics Commission filers)

4 Date
5/5/99

5 Payee name
Travis County Democratic Party
6 Payee address; City, State, Zip Code

7 Amount (\$)
100.00

8 Purpose of expenditure
Killer Bee Function

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

Date
5/27/99

Payee name
..... Sam Biscoe Juneteenth Celebration
Payee address; City, State, Zip Code

Amount (\$)
25.00

Purpose of expenditure
Juneteenth Celebration Sponsorship

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

Date
2/19/99

Payee name
CASA
Payee address; City, State, Zip Code

Amount (\$)
250.00

Purpose of expenditure
Hillbilly Heaven Event

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

Date
4/20/99

Payee name
AYLA
Payee address; City, State, Zip Code

Amount (\$)
150.00

Purpose of expenditure
Law Day Banquet

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

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LOANS (JUDICIAL)

SCHEDULE E (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule E(J):	
2 FILER NAME		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨			\$
5 Date of loan	7 Name of lender <input type="checkbox"/> 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 <input type="checkbox"/> none			
18 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	19 Name of guarantor		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)			

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