CORRECTED FORM C/OH
AND
GOOD-FAITH AFFIDAVIT

See backside for instructions

4436

1 ACCOUNT#

2 Total pages filed:

3 CANDIDATE/ OFFICEHOLDER NAME

TITLE | FIRST: Janet | MI

NICKNAME | LAST: Stockard | SUFFIX

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [ ] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after campaign treasurer appointment (officeholder only)
- [x] Final report

5 ORIGINAL PERIOD COVERED

Month Day Year: 1/1/98 THROUGH Month Day Year: 12/31/98

FILED JAN 7 4 55 PM '00

Receipt #

HD / PM | Amount

Date Processed

Date Imaged

6 EXPLANATION OF CORRECTION

I could not find the box with all my records in it, so I had to try to remember. I could not remember the correct numbers.

7 AFFIDAVIT

I swear, or affirm, that this corrected report is true and correct and that I am filing this corrected report promptly after learning of the error(s) in the original report. I swear, or affirm, that I did not intend to violate a reporting requirement when I filed the original report.

GLORIA RETTA MORENO
NOTARY PUBLIC
State of Texas
Comm. Exp. 09-09-2003

AFFIX NOTARY STAMP/SEAL ABOVE

FILED JAN 7 4 55 PM '00

Signature of Candidate or Officeholder

Sworn to and subscribed before me by Janet Stockard this the 7th day of January, 2000

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

Gloria Retta Moreno | Gloria Retta Moreno | notary

Signature of officer administering oath | Print name of officer administering oath | Title of officer administering oath

Remember To Attach Any Part Of Form C/OH Needed To Report And Explain Corrections

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

14 C/OH NAME: JANET STOCKARD

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

☐ additional pages

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	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)	$25,800.
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$25,800.
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. to the best of my understanding

Janet Stockard
Signature of Candidate or Officeholder

GLORIA RETTA MORENO
NOTARY PUBLIC
State of Texas
Comm. Exp. 09-09-2003

FILED
JAN 4

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Janet Stockard, this the 7th day of January, 2000, to certify which, witness my hand and seal of office.

Gloria Retta Moreno — Signature of officer administering oath
Gloria Retta Moreno — 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

FILED 1 52 PM '00

OFFICE USE ONLY

Date Received

Receipt #

HD / PM | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: Janet | MI

NICKNAME | LAST: Stockard | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 1411 West Ave, Austin, Texas 78701

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: Nora | MI

NICKNAME | LAST: Longoria | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 1411 West Ave, Austin, Texas 78701

7 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION: (512) 799-8968

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: 1/1/98 THROUGH Month Day Year: 12/31/98

10 ELECTION

ELECTION DATE Month Day Year: 3/ /98

ELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE HELD (if any): —

12 OFFICE SOUGHT (if known): 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

JAN 11 52 PM '00

GO TO PAGE 2

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): 1

2 FILER NAME: JANET STOCKARD

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-98	Louise Stockard 5810 Meadow Way Beaumont, Texas 77707	23,000.	

9 Contributor's principal occupation: retired

10 Contributor's job title: retired

11 Contributor's employer/law firm: None

12 Law firm of contributor's spouse (if any): None

13 If contributor is a child, law firm of parent(s) (if any): none

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-98	Mollie Wing 4900 Valley Oak AUSTIN, TEXAS 78731	2,500.	

Contributor's principal occupation: Skin care

Contributor's job title: Skin care specialist

Contributor's employer/law firm: N/A

Law firm of contributor's spouse (if any): N/A

If contributor is a child, law firm of parent(s) (if any): N/A

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-98	Gene Reischman 3707 CLOUDY RIDGE AUSTIN, TEXAS 78734	300.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Private Practice

Law firm of contributor's spouse (if any): N/A

If contributor is a child, law firm of parent(s) (if any): N/A.

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor 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 of 3

2 FILER NAME: JANET STOCKARD

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2-20-98	K.V.U.E. TV 3201 Stack Ave Austin, Texas 78757	$8,844.25

8 Purpose of expenditure: t.v. commercials

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 ($)
2-25-98	K.V.U.E. TV. 3201 Stack Ave Austin, Texas 78757	$578.00

Purpose of expenditure: tv commercials

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2-25-98	KXAN TV. 908 W. MLK Blvd Austin, Texas 78701	7,290.00

Purpose of expenditure: tv. commercials

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2-26-98	KXAN TV 908 W. MLK Blvd Austin, Texas 78701	$105.00

Purpose of expenditure: tv commercials

** 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 of 3

2 FILER NAME: JANET STOCKARD

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2-25-98	KEYE TV. 10700 Metric Austin Texas 78758	3,060.00

8 Purpose of expenditure	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name	Office sought / held
tv. commercials		

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2-20-98	Paul Greenway Production P.O. Box 27482 Austin, Texas 78755	1,500.00

Purpose of expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name	Office sought / held
to produce tv. commercial		

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2-26-98	Paul Greenway Production P.O. Box 27482 Austin, Texas 78755	1,545.00

Purpose of expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name	Office sought / held
to produce tv commercial		

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3-5-98	Opinion Analysts 906 Rio Grande, Austin, Texas 78701	115.74

Purpose of expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name	Office sought / held
political information		

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 3

2 FILER NAME: JANET STOCKARD

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
6-30-98	Paper Trail Research 816 Congress Austin, Texas Suite #1200 78701	1,000.00

8 Purpose of expenditure	9 ← Complete if direct expenditure to benefit C/OH → Candidate / Officeholder name	Office sought / held
political research		

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4-17-98	Mollie Wing 4900 Valley Oak AUSTIN, Texas 78731	1,700.00

Purpose of expenditure	← Complete if direct expenditure to benefit C/OH → Candidate / Officeholder name	Office sought / held
refund of unused contribution		

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6-98	Louise Stockard 5810 Meadow Way Beaumont, Texas 77707	62.01

Purpose of expenditure	← Complete if direct expenditure to benefit C/OH → Candidate / Officeholder name	Office sought / held
refund of unused contribution		

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

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM **JC/OH - FR**

The JC/OH Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on JC/OH page 1 is marked "Final Report" ••

1 C/OH NAME

2 ACCOUNT # (Ethics Commission file/s)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature ~~of Candidate~~ / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are a candidate ••

A. CAMPAIGN FUNDS

Check only one:

☑ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☑ I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer appointment on file.

Signature of Officeholder