

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **FILED** **FORM JC/OH COVER SHEET PG 1**

JAN 8 1 05 PM '00

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

1 ACCOUNT # (Ethics Commission filed) 00020024 TEXAS

2 Total pages filed: 9

3 CANDIDATE / OFFICEHOLDER NAME

TITLE FIRST MI
Judge Margaret A.
NICKNAME LAST SUFFIX
Cooper

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P. O. Box 1748 Austin TX 78767
 Change of Address

Date Hand-delivered or Date Postmarked

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI
Velva L.
NICKNAME LAST SUFFIX
Price

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1601 Ridgemont Drive Austin TX 78723

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 451-0942

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 COH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
10 / 30 / 00 THROUGH 12 / 31 / 00

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
03 / 09 / 04
 Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)
Judge, 353rd District Court

12 OFFICE SOUGHT (if known)

Judge, 353rd District Court

13 NOTICE OF 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 known

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 Margaret A. Cooper

15 ACCOUNT # (Ethics Commission File #)
00020024

16 NOTICE FROM POLITICAL COMMITTEE(S)

*** This box is for notice of 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

GENERAL

SPECIFIC

additional pages

COMMITTEE NAME

None known

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)

\$ 615.00

EXPENDITURE TOTALS

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

\$ -

4. TOTAL POLITICAL EXPENDITURES

\$ 5,342.00

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 54,691.00

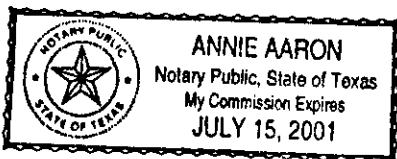
OUTSTANDING LOAN TOTALS

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.



Margaret A. Cooper
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Margaret A. Cooper, this the 9th day of January, 20 01, to certify which, witness my hand and seal of office.

Annie Aaron
Signature of officer administering oath

Annie Aaron
Print name of officer administering oath

Notary Public
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):

2

2 FILER NAME

Judge Margaret A. Cooper

3 ACCOUNT # (Ethics Commission files)

00020024

4 Date

11/4/00

5 Full name of contributor out-of-state PAC (ID#: _____)

Richard Pena, P.C.

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
2028 E. Ben White Blvd., Ste. 220
Austin, TX 78741

9 Contributor's principal occupation
Law Firm

10 Contributor's job title
Attorneys

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

11/4/00

Full name of contributor out-of-state PAC (ID#: _____)

Scott Moore

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
2507 Stratford Drive
Austin, TX 78746

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

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)

Date

11/4/00

Full name of contributor out-of-state PAC (ID#: _____)

Lou McCreary

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
400 W. 15th St., Ste. 304
Austin, TX 78701

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

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):
2

2 FILER NAME

Judge Margaret A. Cooper

3 ACCOUNT # (Ethics Commission files)
00020024

4 Date
11/4/00

5 Full name of contributor out-of-state PAC (ID#: _____)
John F. Campbell

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
805 W. 10th st., Ste. 300
Austin, TX 78701

\$100.00

9 Contributor's principal occupation
Attorney

10 Contributor's job title
Attorney

11 Contributor's employer/law firm
Campbell & Morgan

12 Law firm of contributor's spouse (if any)

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

Date
11/1/00

Full name of contributor out-of-state PAC (ID#: _____)
Mary Pearl Williams

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3503 Mt. Barker Dr.
Austin, TX 78731

\$100.00

Contributor's principal occupation
Retired Judge

Contributor's job title
Retired Judge

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
11/11/00

Full name of contributor out-of-state PAC (ID#: _____)
Laurie A. Cook

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
105 Bulian Lane #C
Austin, TX 78746

\$15.00

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

Contributor's employer/law firm
261st District Court

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 EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:
4

2 FILER NAME
Judge Margaret A. Cooper

3 ACCOUNT # (Ethics Commission filers)
00020024

4 Date 10/30/00	5 Payee name Pat Crow	7 Amount (\$) \$145.00
6 Payee address; City; State; Zip Code 1914 Patton Lane Austin, TX 78723		

8 Purpose of payment (See instructions regarding type of information required.)
Professional services

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

Date 10/31/00	Payee name W. Jeanne Meurer	Amount (\$) \$20.00
Payee address; City; State; Zip Code P. O. Box 1748 Austin, TX 78767		

Purpose of payment (See instructions regarding type of information required.)
Contribution/staff retirement reception

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

Date 11/1/00	Payee name Opinion Analysts	Amount (\$) \$500.00
Payee address; City; State; Zip Code 906 Rio Grande Austin, TX 78701		

Purpose of payment (See instructions regarding type of information required.)
Polling

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

Date 11/1/00	Payee name Travis County Democratic Party	Amount (\$) \$500.00
Payee address; City; State; Zip Code P. O. Box 684263 Austin, TX 78768		

Purpose of payment (See instructions regarding type of information required.)
GOIV Program

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

NEED 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

2 FILER NAME
Judge Margaret A. Cooper

3 ACCOUNT # (Ethics Commission filers)
00020024

4 Date
11/1/00

5 Payee name
David Butts

7 Amount (\$)
\$3,000.00

6 Payee address; City; State; Zip Code
1914 Patton Lane Austin, TX 78723

8 Purpose of payment (See instructions regarding type of information required.)
Professional Services

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

Date
11/6/00

Payee name
Southwestern Bell
Payee address; City; State; Zip Code
P. O. Box 4844 Houston, TX 77097

Amount (\$)
\$22.13

Purpose of payment (See instructions regarding type of information required.)
Phone service

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

Date
11/7/00

Payee name
Travis County Women Lawyers Association
Payee address; City; State; Zip Code
P. O. Box 684683 Austin, TX 78768

Amount (\$)
\$385.00

Purpose of payment (See instructions regarding type of information required.)
Endowment of Mary Pearl Williams Scholarship Fund

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

Date
11/21/00

Payee name
Margaret A. Cooper
Payee address; City; State; Zip Code
P. O. Box 1748 Austin, TX 78767

Amount (\$)
\$19.00

Purpose of payment (See instructions regarding type of information required.)
Reimbursement for political expenses from personal funds

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

2 FILER NAME
Judge Margaret A. Cooper

3 ACCOUNT # (Ethics Commission filers)
00020024

4 Date 12/1/00	5 Payee name Carpenter & Langford, P.C.	7 Amount (\$) \$200.00
6 Payee address; City; State; Zip Code 4407 Bee Caves Rd., Bldg. 6, Ste. 621 Austin, TX 78746		

8 Purpose of payment (See instructions regarding type of information required.)
Campaign tax services

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

Date 12/1/00	Payee name Travis County Women Lawyers Association	Amount (\$) \$30.00
Payee address; City; State; Zip Code P. O. Box 684683 Austin, TX 78768		

Purpose of payment (See instructions regarding type of information required.)
Annual dues

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

Date 12/11/00	Payee name Travis County Bar Association	Amount (\$) \$15.00
Payee address; City; State; Zip Code 700 Lavaca, Suite 602 Austin, TX 78701		

Purpose of payment (See instructions regarding type of information required.)
Section dues

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

Date 12/1/00	Payee name Texas Bar Foundation	Amount (\$) \$200.00
Payee address; City; State; Zip Code P. O. Box 12487 Austin, TX 78711		

Purpose of payment (See instructions regarding type of information required.)
Annual dues

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

ALL INFORMATION ON THIS FORM IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE

POLITICAL EXPENDITURES

SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

1 Total pages Schedule F:
4

2 FILER NAME
Judge Margaret A. Cooper

3 ACCOUNT # (Ethics Commission files)
00020024

4 Date	5 Payee name	7 Amount (\$)
12/1/00	State Bar College	\$35.00
	6 Payee address; City; State; Zip Code P. O. Box 12487 Austin, TX 78711	

8 Purpose of payment (See instructions regarding type of information required.) Annual dues	9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
12/8/00	Southwestern Bell	\$20.75
	Payee address; City; State; Zip Code P. O. Box 4844 Houston, TX 77097	

Purpose of payment (See instructions regarding type of information required.) Telephone service	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
12/18/00	Carpenter and Langford, P.C.	\$250.00
	Payee address; City; State; Zip Code 4407 Bee Cave Rd., Bldg 6., Ste. 621 Austin, TX 78746	

Purpose of payment (See instructions regarding type of information required.) Campaign tax services	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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AVAILON POLITICAL ACTION COMMITTEES MAY USE THIS FORM AS NEEDED

ASSETS VALUED AT \$500 OR MORE

SCHEDULE M

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule M:
1

2 FILER NAME

Judge Margaret A. Cooper

3 ACCOUNT # (Ethics Commission filers)

00020024

4 Description of Asset

Computer equipment

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

ATTACH ADDITIONAL COPIES OF THIS FORM IF NEEDED