

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

4768

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:

2

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: BEMBRY BARBARA @
NICKNAME: LAST: SUFFIX:

OFFICE USE ONLY

Date Received

Receipt #

HD / RM

Date Processed

Date Imaged

County Clerk: Travis County, Texas

City of

Day

Month

Year

AM

PM

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE
P.O. Box 26355
Austin, TX 78755

Change of Address

5 CAMPAIGN TREASURER NAME

TITLE: TOM SANSING
NICKNAME: LAST: SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE
3910 FAR WEST Blvd
Austin, TX 78731

7 CAMPAIGN TREASURER PHONE

AREA CODE: PHONE NUMBER: EXTENSION:
(512) 345-3712

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 THROUGH Month Day Year
7 / 1 / 00 THROUGH 12 / 31 / 00

10 ELECTION

ELECTION DATE: Month Day Year: 11 / 2 / 98
ELECTION TYPE: Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any): Judge - JP 2

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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME BEMBRY, BARBARA C.

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

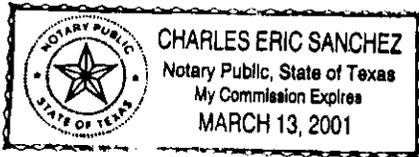
additional pages

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	\$
	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	\$
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Barbara Bembry
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Barbara Bembry this the 16th day of January 2001, to certify which, witness my hand and seal of office.

Charles E. Sanchez
Signature of officer administering oath

Charles Eric Sanchez
Print name of officer administering oath

Notary Public
Title of officer administering oath