

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM JC/OH
COVER SHEET PG 1**

4777

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
JUDGE WILFORD
NICKNAME LAST SUFFIX
WIL FLOWERS

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE
6912 GAUR DRIVE
AUSTIN, TEXAS 78749
 Change of Address

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI
JAN
NICKNAME LAST SUFFIX
SOIFER

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE
100 CONGRESS AVENUE SUITE 300
AUSTIN, TEXAS 78701

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 305 4700

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
07/01/00 THROUGH 12/31/00

10 ELECTION

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

11 OFFICE

OFFICE HELD (if any)
JUDGE, 147TH DISTRICT

12 OFFICE SOUGHT (if known)

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

Address / PO Box, Apt. / Suite #, City, State, Zip Code

additional pages

OFFICE USE ONLY
Date Received: At 1:45 o'clock PM on 16 day of Jan 2004
Date Hand Delivered or Date Marked: Dana DeBeauvoir County Clerk, Travis County, Texas
Receipt # Amount
Date Processed
Date Imaged

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME

WILFORD FLOWERS

15 ACCOUNT # (Ethics Commission files)

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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

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)

\$ *511.09*

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ *2,750.00*

CONTRIBUTION BALANCE

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

\$ *19,330.99*

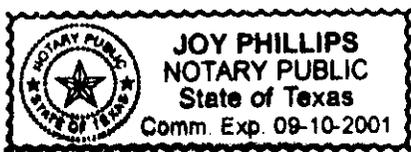
OUTSTANDING LOAN TOTALS

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.



[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Joy Phillips
Signature of officer administering oath

Print name of officer administering oath

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):

4

2 FILER NAME

WILFORD FLOWERS

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/7/00

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

BANK ONE

7 Amount of contribution (\$)

50.80

8 In-kind contribution description (if applicable)

Interest Earned

6 Contributor address; City; State; Zip Code

221 WEST 6th ST.

AUSTIN, TEXAS 78701

9 Contributor's principal occupation

BANKING

10 Contributor's job title

BANK

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

7/14/00

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

BANK ONE

Amount of contribution (\$)

175.76

In-kind contribution description (if applicable)

Interest Earned

Contributor address; City; State; Zip Code

221 WEST 6th ST.

AUSTIN, TEXAS 78701

Contributor's principal occupation

BANKING

Contributor's job title

BANK

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

7/26/00

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

BANK ONE

Amount of contribution (\$)

2.04

In-kind contribution description (if applicable)

Interest Earned

Contributor address; City; State; Zip Code

221 WEST 6th ST.

AUSTIN, TEXAS 78701

Contributor's principal occupation

BANKING

Contributor's job title

BANK

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)

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): 4	
2 FILER NAME WILFORD FLOWERS		3 ACCOUNT # (Ethics Commission filers)	
4 Date 8/23/00	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BANK ONE	7 Amount of contribution (\$) 1.76 <i>Interest Earned</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 221 WEST 6TH ST. AUSTIN, TEXAS 78701			
9 Contributor's principal occupation BANKING		10 Contributor's job title BANK	
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 9/26/00	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BANK ONE	Amount of contribution (\$) 1.94 <i>Interest Earned</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 221 WEST 6TH ST. AUSTIN, TEXAS 78701			
Contributor's principal occupation BANKING		Contributor's job title BANK	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	

Date 10/5/00	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BANK ONE	Amount of contribution (\$) 50.79 <i>Interest Earned</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 221 WEST 6TH ST. AUSTIN, TEXAS 78701			
Contributor's principal occupation BANKING		Contributor's job title BANK	
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)

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): 4	
2 FILER NAME WILFORD FLOWERS		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/16/00	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANK ONE	7 Amount of contribution (\$) 221.18	8 In-kind contribution description (if applicable) Interest Earned
6 Contributor address; City; State; Zip Code 221 WEST 6th ST. AUSTIN, TEXAS 78701			
9 Contributor's principal occupation BANKING		10 Contributor's job title BANK	
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 10/25/00	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANK ONE	Amount of contribution (\$) 2.65	In-kind contribution description (if applicable) Interest Earned
Contributor address; City; State; Zip Code 221 WEST 6th ST AUSTIN, TEXAS 78701			
Contributor's principal occupation BANKING		Contributor's job title BANK	
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 11/24/00	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANK ONE	Amount of contribution (\$) 2.13	In-kind contribution description (if applicable) Interest Earned
Contributor address; City; State; Zip Code 221 WEST 6th ST. AUSTIN, TEXAS 78701			
Contributor's principal occupation BANKING		Contributor's job title BANK	
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)			

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): 4	
2 FILER NAME WILFORD FLOWERS		3 ACCOUNT # (Ethics Commission filers)	
4 Date 12/26/00	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANK ONE	7 Amount of contribution (\$) 2.04	8 In-kind contribution description(if applicable) Interest Earned
6 Contributor address; City; State; Zip Code 221 WEST 6TH ST. AUSTIN, TEXAS 78701			
9 Contributor's principal occupation BANKING		10 Contributor's job title BANK	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description(if applicable)
Contributor's principal occupation		Contributor's job title	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description(if applicable)
Contributor's principal occupation		Contributor's job title	
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)			

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. **2**

2 FILER NAME **WILFORD FLOWERS**

3 ACCOUNT # (Ethics Commission filers)

4 Date
7/25/00

5 Payee name
AUSTIN AFL-CIO

7 Amount (\$)
135.00

6 Payee address; City; State; Zip Code
**1106 LAVACA
AUSTIN, TEXAS 78701**

8 Purpose of payment (See instructions regarding type of information required.)
Labor day advertisement

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

Date
7/25/00

Payee name
SOUTH AUSTIN DEMOCRATS

Amount (\$)
50.00

Payee address; City; State; Zip Code
**PO Box 152592
AUSTIN, TEXAS 78715-2592**

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

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

Date
8/6/00

Payee name
NATIONAL BAR ASSOCIATION

Amount (\$)
150.00

Payee address; City; State; Zip Code
**1225 11th STREET N.W.
WASHINGTON, D.C. 20001-4217**

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

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

Date
10/18/00

Payee name
TRAVIS COUNTY DEMOCRATIC PARTY

Amount (\$)
1,000.00

Payee address; City; State; Zip Code
**PO Box 684263
AUSTIN, TEXAS 78768-4263**

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

**** 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: **2**

2 FILER NAME **WILFORD FLOWERS** 3 ACCOUNT # (Ethics Commission filers)

4 Date 11/2/00	5 Payee name TRAVIS COUNTY DEMOCRATIC PARTY	7 Amount (\$) 1,000.00
6 Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TEXAS 787684263		

8 Purpose of payment (See instructions regarding type of information required.) Get out the vote efforts	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 12/18/00	Payee name TRAVIS COUNTY WOMEN LAWYERS	Amount (\$) 385.00
Payee address; City; State; Zip Code PO BOX 684683 AUSTIN, TEXAS 78768		

Purpose of payment (See instructions regarding type of information required.) Scholarships	9 ** 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.)	9 ** 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.)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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