

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME

Elena Diaz

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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME
	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

\$ 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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 470.00

CONTRIBUTION
BALANCE

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

\$ 3,221.63

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 130.00

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Elena Diaz

 Signature of Candidate or Officeholder

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

Diana R Cantu
Signature of officer administering oath

Diana R Cantu
Print name of officer administering oath

Notary Public
Title of officer administering oath

**POLITICAL
EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F 2
2 FILER NAME Elena Diaz		3 ACCOUNT # (Ethics Commission filers)
4 Date 07/09/00	5 Payee name Cristo Rey Catholic Church 6 Payee address: City, State, Zip Code 2110 E. 2nd Street Austin, TX 78702	7 Amount (\$) \$125.00
8 Purpose of expenditure Ad for Jamaica Program		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 08/11/00	Payee name South Austin Democrats Payee address: City, State, Zip Code P.O. Box 152592 Austin, TX 78715-2592	Amount (\$) \$60.00
Purpose of expenditure Membership dues (\$10.00) and Yeller Dawg Fundraiser Sponsorship (\$50.00)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 09/10/00	Payee name Travis County Democratic Party Payee address: City, State, Zip Code P.O. Box 684263 Austin, TX 78768-4263	Amount (\$) \$50.00
Purpose of expenditure 2000 Coordinated Campaign		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought / held
Date 09/10/00	Payee name South Austin Tejano Democrats Payee address: City, State, Zip Code P.O. Box 12683 Austin, TX 78711	Amount (\$) \$15.00
Purpose of expenditure Annual Membership dues		.. 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

2 FILER NAME Elena Diaz**3** ACCOUNT # (Ethics Commission filers)**4** Date
09/29/00**5** Payee name
United East Austin Co**7** Amount
(\$)
\$50.00**6** Payee address, City, State, Zip Code
1511 Haskell Street
Austin, TX 78702**8** Purpose of expenditureSponsorship of 15th Annual Dia de la Raza
Celebration**9** .. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

10/06.00

Payee name
YWCA of Greater AustinAmount
(\$)
\$100.00Payee address, City, State, Zip Code
1524 S. IH 35
Austin, TX 78704

Purpose of expenditure

Sponsorship of "The Lives We've Touched"
Fundraiser (\$85.00) and membership dues(15.00).. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount
(\$)

Payee address, City, State, Zip Code

Purpose of expenditure

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount
(\$)

Payee address, City, State, Zip Code

Purpose of expenditure

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule G 1

2 FILER NAME **Elena Diaz** 3 ACCOUNT # (Ethics Commission filers)

4 Date 11/14/00	5 Payee name River City Youth Foundation 6 Payee address: City, State, Zip Code 5209 S. Pleasant Valley Austin, TX 78744	8 Amount (\$) \$25.00
	7 Purpose of expenditure Youth Trip Sponsorship	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address: City, State, Zip Code	Amount (\$)
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address: City, State, Zip Code	Amount (\$)
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address: City, State, Zip Code	Amount (\$)
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name Payee address: City, State, Zip Code	Amount (\$)
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

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OUTSTANDING LOANS

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule L

1

2 FILER NAME

Elena Diaz

3 ACCOUNT # (Ethics Commission filers)

LENDER INFORMATION

4 Name of lender

Elena Diaz

5 Lender address: City: State: Zip Code

2928 Wickersham Ln., Austin, TX 78741

GUARANTOR INFORMATION

6 Name of guarantor

7 Guarantor address: City: State: Zip Code

not applicable

LENDER INFORMATION

Name of lender

Lender address: City: State: Zip Code

GUARANTOR INFORMATION

Name of guarantor

Guarantor address: City: State: Zip Code

not applicable

LENDER INFORMATION

Name of lender

Lender address: City: State: Zip Code

GUARANTOR INFORMATION

Name of guarantor

Guarantor address: City: State: Zip Code

not applicable

LENDER INFORMATION

Name of lender

Lender address: City: State: Zip Code

GUARANTOR INFORMATION

Name of guarantor

Guarantor address: City: State: Zip Code

not applicable

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

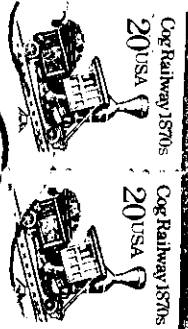
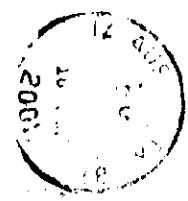
Element Press
2925 Wicklow Shown Ln.
Austin TX 78724

Received

1-22-01

3:15

PM



DANA DEBEAUVOIR
County Clerk, Travis County
P.O. Box 1748
Austin, Texas 78767