

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

4899

The JC/OH Instruction Guide explains how to complete this form. **1 ACCOUNT#** (Ethics Commission filers) **2 Total pages filed:** 6

**3 CANDIDATE / OFFICEHOLDER NAME**  
 TITLE: Judge Elena Diaz  
 FIRST: Elena  
 MI: Diaz  
 NICKNAME: LAST: SUFFIX:

**OFFICE USE ONLY**  
 Date Received: 01 JUL 19 AM 10:07  
 FILED  
 DANA DECKER, CLERK  
 COUNTY CLERK  
 TRAVIS COUNTY, TEXAS  
 Receipt #  
 HD / PM  
 Amount  
 Date Processed  
 Date Imaged

**4 CANDIDATE / OFFICEHOLDER ADDRESS**  
 ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
 2928 Wickersham Ln.  
 Austin, TX 78741-7352  
 Change of Address

**5 CAMPAIGN TREASURER NAME**  
 TITLE: Elena Diaz  
 FIRST: Elena  
 MI: Diaz  
 NICKNAME: LAST: SUFFIX:

**6 CAMPAIGN TREASURER ADDRESS**  
 (Residence or business)  
 STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
 2928 Wickersham Ln.  
 Austin, TX 78741-7352

**7 CAMPAIGN TREASURER PHONE**  
 AREA CODE: (512) PHONE NUMBER: 389-1189 EXTENSION:

**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: 01 / 01 / 01 THROUGH Month / Day / Year: 06 / 30 / 01

**10 ELECTION**  
 ELECTION DATE: Month / Day / Year: / / ELECTION TYPE:  Primary  Runoff  General  Special

**11 OFFICE** OFFICE HELD (if any): Justice of the Peace Pct. 4, Travis County, TX **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

# 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

5 Payee name

7 Amount  
(\$)

3/9/01

Travis County Democratic Party

\$250.00

6 Payee address: City, State, Zip Code  
P. O. Box 684263  
Austin, TX 78768-4263

8 Purpose of expenditure

Finance Council Contribution

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

Office sought / held

Date

Payee name

Amount  
(\$)

3/15/01

Texas Dollars for Democrats

\$25.00

6 Payee address: City, State, Zip Code  
919 Congress Ave.  
Austin, Tx 78701

Purpose of expenditure

Contribution

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

Office sought / held

Date

Payee name

Amount  
(\$)

3/24/01

Justice of the Peace and Constable Assn. of TX

\$45.00

6 Payee address: City, State, Zip Code  
P. O. Box 2048  
Wylie, TX 75098

Purpose of expenditure

Membership dues

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

Office sought / held

Date

Payee name

Amount  
(\$)

4/4/01

Cinco de Mayo Committee - Travis County

\$25.00

6 Payee address: City, State, Zip Code  
314 W. 11th St., Ste. 525  
Austin, TX 78701

Purpose of expenditure

Sponsorship for Annual Cinco de Mayo Celebration

-- 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 fees)

4 Date

6/01/01

5 Payee name

Sam Biscoe , Special Projects, Travis County

7

Amount

(\$)  
\$25.00

6 Payee address: City, State, Zip Code

314 W. 11th St., 5th Floor  
Austin, TX 78701

8 Purpose of expenditure

Sponsorship of Annual Juneteenth  
Celebration

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

6/12/01

Payee name

Cristo Rey Catholic Church

Amount

(\$)  
\$125.00

Payee address: City, State, Zip Code

2110 E. 2nd St.  
Austin, TX 78702

Purpose of expenditure

Ad for annual Jamaica Program

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

6/24/01

Payee name

San Francisco Javier Catholic Church

Amount

(\$)  
\$75.00

Payee address: City, State, Zip Code

9110 Hwy. 183 South  
Austin, TX 78747

Purpose of expenditure

Ad for annual Jamaica program

-- 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 <b>1</b>
2 FILER NAME <b>Elena Diaz</b>		3 ACCOUNT # (Ethics Commission form)
4 Date <b>3/20/01</b>	5 Payee name <b>Hispanic Women's Network of Texas-Austin Chapter</b>	6 Amount (\$) <b>\$35.00</b>
	6 Payee address: City, State, Zip Code <b>P. O. Box 1356 Austin, TX 78767-1356</b>	
	7 Purpose of expenditure <b>Membership dues</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <b>4/18/01</b>	Payee name <b>Austin Women's Political Caucus</b>	Amount (\$) <b>\$60.00</b>
	Payee address: City, State, Zip Code <b>P. O. Box 12383 Austin, TX 78711</b>	
	Purpose of expenditure <b>Membership dues</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <b>4/21/01</b>	Payee name <b>Texas Environmental Democrats</b>	Amount (\$) <b>\$10.00</b>
	Payee address: City, State, Zip Code <b>San Antonio, TX</b>	
	Purpose of expenditure <b>Membership dues</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <b>5/5/01</b>	Payee name <b>University of Texas Law School Foundation</b>	Amount (\$) <b>\$150.00</b>
	Payee address: City, State, Zip Code <b>727 E. Dean Keeton Dr. Austin, TX 78705</b>	
	Purpose of expenditure <b>Comemorative Brick</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <b>5/5/01</b>	Payee name <b>Capitol Area Democratic Women</b>	Amount (\$) <b>\$25.00</b>
	Payee address: City, State, Zip Code <b>P. O. Box 12962 Austin, TX 78711</b>	
	Purpose of expenditure <b>Membership dues</b>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# OUTSTANDING LOANS

## SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule L

1

3 ACCOUNT # (Ethics Commission filers)

2 FILER NAME

Elena Diaz

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

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