

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

4978

FORM JC/OH COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: <u>9</u>
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3 CANDIDATE / OFFICEHOLDER NAME	TITLE <i>Judge</i>	FIRST <i>Orlinda</i>	MI <i>L</i>	OFFICE USE ONLY	
	NICKNAME	LAST <i>NARANJO</i>	SUFFIX		

FILED
 02 JAN 14 PM 3:39
 BARRA DELETERIO
 COUNTY CLERK
 TRAVIS COUNTY TEXAS

4 CANDIDATE / OFFICEHOLDER ADDRESS	ADDRESS / PO BOX: <i>P.O. Box 2430</i>	APT / SUITE #:	CITY: <i>Austin Tx</i>	STATE: <i>TX</i>	ZIP CODE: <i>78768</i>
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Change of Address

5 CAMPAIGN TREASURER NAME	TITLE	FIRST <i>Jeh</i>	MI <i>E</i>	Receipt #	
	NICKNAME	LAST <i>Rusk</i>	SUFFIX	HD / PM	Amount
	Date Processed				
	Date Imaged				

6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): <i>910 Lavaca St.</i>	APT / SUITE #:	CITY: <i>Austin Tx</i>	STATE: <i>TX</i>	ZIP CODE: <i>78701</i>
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7 CAMPAIGN TREASURER PHONE	AREA CODE: <i>(512)</i>	PHONE NUMBER: <i>476-7600</i>	EXTENSION:
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8 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final report (Attach JC/OH - FR)

9 PERIOD COVERED	Month Day Year: <i>7 / 1 / 2001</i>	THROUGH	Month Day Year: <i>12 / 31 / 2001</i>
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10 ELECTION	ELECTION DATE: Month Day Year: <i>11 / 05 / 2002</i>	ELECTION TYPE: <input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> General	<input type="checkbox"/> Special
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11 OFFICE OFFICE HELD (if any): <i>Judge of the Precincts County Court At Law #2</i>	12 OFFICE SOUGHT (if known)
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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: <i>N/A</i>				
	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	15 ACCOUNT # (Ethics Commission filers)
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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 checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME	Judge Orlanda Narango
	COMMITTEE ADDRESS	P.O. Box 2430 Austin TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME	J. E. Rusk
	COMMITTEE CAMPAIGN TREASURER ADDRESS	910 La Graca St Austin TX 78701

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)	\$ 5,500 -
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,577 ⁹⁰ -
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,127 ⁸⁰ -
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 11,424 -

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.

Orlanda Narango
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Orlanda Narango this the 14th day of January 2007, to certify which, witness my hand and seal of office.

Armando R. Martinez
Signature of officer administering oath

Armando R. Martinez
Print name of officer administering oath

Office Specialist
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):
1 of 2

2 FILER NAME Judge Orinda Navarrete 3 ACCOUNT # (Ethics Commission filers)

4 Date <u>12/09/01</u>	5 Full name of contributor <input type="checkbox"/> out of state PAC <u>Vinson & Elkin P.A.C.</u>	7 Amount of contribution (\$) <u>\$500</u>	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code <u>One Am City, Ste 2700 600 Congress Ave, Austin TX 78701</u>			

9 Contributor's principal occupation Law firm 10 Contributor's job title

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 <u>12/05/01</u>	Full name of contributor <input type="checkbox"/> out of state PAC <u>Davis & Willkerson, P.C.</u>	Amount of contribution (\$) <u>\$500</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>P.O. Box 2283 Austin TX 78768-2283</u>			

Contributor's principal occupation Law firm 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 <u>12/26/01</u>	Full name of contributor <input type="checkbox"/> out of state PAC <u>Shields & Rusk, P.C.</u>	Amount of contribution (\$) <u>\$1,000</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>910 Lavaca Austin TX 78701</u>			

Contributor's principal occupation Law firm 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 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): <i>2 of 2</i>	
2 FILER NAME <i>Judge Onirivetei Navarajo</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>11/26/01</i>	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>JACKSON WALKER, LLP PAC</i>	7 Amount of contribution (\$) <i>\$ 1,000-</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>901 Main St, Ste 6000 Dallas TX 75202-3748</i>			
9 Contributor's principal occupation <i>law firm</i>		10 Contributor's job title	
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 <i>11/28/01</i>	Full name of contributor <input type="checkbox"/> out of state PAC <i>JULY, CROSS & WILCOX P.C.</i>	Amount of contribution (\$) <i>\$ 2,500-</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>8140 N. MoPac, Bldg 2-150 Austin, TX 78759-8860</i>			
Contributor's principal occupation <i>law firm</i>		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	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
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.

LOANS (JUDICIAL)

SCHEDULE E (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule E(J): 1011	
2 FILER NAME Judge Orhinda NARANJO		3 ACCOUNT # (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED LOANS: ◊ ◊ ◊ ◊ ◊ ◊			\$ 11,424
5 Date of loan 1994	7 Name of lender Jim Eubank <input type="checkbox"/> out of state PAC	9 Loan Amount (\$) 11,424	
6 Is lender a financial institution? Y (N)	8 Lender address: City: State: Zip Code 411 Crossland Dr Spicewood TX 78669	10 Interest rate -0-	
		11 Maturity date n/a	
12 Lender's Principal Occupation Attorney spouse		13 Lender's Job Title shareholder	
14 Lender's Employer/Law Firm Eubank and Bryan P.C.		15 Law Firm of lender's spouse (if any)	
16 If lender is child, law firm of parent(s) (if any)			
17 Description of Collateral: <input checked="" type="checkbox"/> none			
18 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	19 Name of guarantor		21 Amount Guaranteed (\$)
		20 Guarantor address: City: State: Zip Code	
22 Guarantor's Principal Occupation		23 Guarantor's Job Title	
24 Guarantor's Employer/Law Firm		25 Law Firm of guarantor's spouse (if any)	
26 If guarantor is child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If lender 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:

1 of 3

2 FILER NAME

Judge Or Linda Naranjo

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/15

5 Payee name

Arriba

7 Amount (\$)

\$50 -

6 Payee address:

P.O. Box 12865
Austin TX 78711

City: State: Zip Code

8 Purpose of expenditure

Aid for Conco de Mayo

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

Candidate / Officeholder name Office sought / held

Date

7/15

Payee name

Lulu Travis Demos

Amount (\$)

\$10 -

Payee address:

Austin TX

City: State: Zip Code

Purpose of expenditure

DUES

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

Candidate / Officeholder name Office sought / held

Date

7/19

Payee name

Travis County Democratic Party

Amount (\$)

\$500 -

Payee address:

P.O. Box 684263
Austin TX 78768-4263

City: State: Zip Code

Purpose of expenditure

finance committee DUES

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

Candidate / Officeholder name Office sought / held

Date

9/24

Payee name

Calvert Branch of CT - Austin Chapter

Amount (\$)

\$350 -

Payee address:

700 Calvert St, Ste 1550
Austin TX 78701

City: State: Zip Code

Purpose of expenditure

DUES

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

Candidate / Officeholder name Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 of 3

2 FILER NAME

Judge Orlanda Naranjo

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

9/25

Leadership Austin

6 Payee address:

City: State: Zip Code

823 Congress Ave, Ste 1330
Austin TX 78701

\$75

8 Purpose of expenditure

Dues

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

Office sought / held

Date

Payee name

Amount (\$)

10/2

Greater Austin Hispanic Chamber of Commerce

Payee address:

City: State: Zip Code

823 Congress Ave Ste 1330
Austin TX 78701-2429

\$75

Purpose of expenditure

Dues

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

Office sought / held

Date

Payee name

Amount (\$)

11/6

Hispanic Bar Assn. of Austin

Payee address:

City: State: Zip Code

P.O. Box 12692
Austin TX 78711-2692

\$50

Purpose of expenditure

Dues

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

Office sought / held

Date

Payee name

Amount (\$)

11/12

Travis County Bar Assn

Payee address:

City: State: Zip Code

700 Lavaca St
Austin TX 78701

\$57

Purpose of expenditure

Ad - Bar + Grill

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

Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form:

1 Total pages Schedule F:

3 of 3

2 FILER NAME

Judge Octinda Naranjo

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

11/19/01

Austin Tejano Democrats

6 Payee address; City; State; Zip Code

502 West 13 St
Austin TX 78701

\$100.00

8 Purpose of expenditure

"Get Out the Vote" contrib

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

Candidate / Officeholder name Office sought / held

Date

Payee name

Amount (\$)

11/19/01

Galley Check

Payee address; City; State; Zip Code

P.O. Box 17400
Baltimore MD 21203

\$109.00

Purpose of expenditure

ck order

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

Candidate / Officeholder name Office sought / held

Date

Payee name

Amount (\$)

10/6

Travis County Demo Party

Payee address; City; State; Zip Code

P.O. Box 684263
Austin TX 78768-4263

\$100.00

Purpose of expenditure

filing Day Party - fee

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

Candidate / Officeholder name Office sought / held

Date

Payee name

Amount (\$)

12/10

Travis County Demo Party

Payee address; City; State; Zip Code

Austin Tx

\$1200.00

Purpose of expenditure

filing fee

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

Candidate / Officeholder name Office sought / held

OUTSTANDING LOANS

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule L:

1 of 1

2 FILER NAME

Judge Catalina Narayana

3 ACCOUNT # (Ethics Commission filers)

LENDER INFORMATION

4 Name of lender

Tim Eubank

5 Lender address; City; State; Zip Code

911 Crosswind Dr Spicewood TX 78669

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code