

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

4992

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed:  3
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Judge Jon N	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX Wisser		
4 CANDIDATE / OFFICEHOLDER ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 7882 Lakewood Austin TX 78750		
	5 CAMPAIGN TREASURER NAME TITLE FIRST MI Judge Jon N NICKNAME LAST SUFFIX Wisser		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 7882 Lakewood Austin TX 78750		
	7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (512) 343-1142		
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    THROUGH    Month Day Year 7 / 1 / 2001          12 / 31 / 2001		
10 ELECTION	ELECTION DATE: Month Day Year    ELECTION TYPE: 3 / 1 / 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any): 299th Judicial District Court    OFFICE SOUGHT (if known): 299th Judicial District Court		
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	** 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:		

GO TO PAGE 2

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

14 C/OH NAME

Jon Wisser

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

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

\$ 500

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 500

EXPENDITURE TOTALS

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

\$ 1200

4. TOTAL POLITICAL EXPENDITURES

\$ 1200

CONTRIBUTION BALANCE

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

\$ -0-

OUTSTANDING LOAN TOTALS

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

\$ 700

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.



Jon Wisser

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jon Wisser, this the 11 day of January

2002, to certify which, witness my hand and seal of office.

Mary Louise Aguirre  
Signature of officer administering oath

MARY LOUISE AGUIRRE  
Print name of officer administering oath

Notary  
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):

2 FILER NAME Jon Wissler 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC <u>Ned Granger</u>	7 Amount of contribution (\$) <u>1500</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>600 W 10<sup>th</sup> Austin, Texas 78701</u>			

9 Contributor's principal occupation Lawyer 10 Contributor's job title

11 Contributor's employer/law firm Law Firm of Ned Granger 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	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)

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):

2 FILER NAME

Jon Wissr

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

12-10-01

7 Name of lender

Jon Wissr

out of state PAC

9 Loan Amount (\$)

700

6 Is lender a financial institution?

Y  N

8 Lender address; City; State; Zip Code

7802 Lakewood Austin TX 78756

10 Interest rate

0

11 Maturity date

non-

12 Lender's Principal Occupation

Judge

13 Lender's Job Title

14 Lender's Employer/Law Firm

294th Dist Ct

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

none

18 GUARANTOR INFORMATION

not applicable

19 Name of guarantor

20 Guarantor address; City; State; Zip Code

21 Amount Guaranteed (\$)

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:

2 FILER NAME

Jon Wisser

3 ACCOUNT # (Ethics Commission filers)

4 Date

12-21-01

5 Payee name

Travis County Democratic Party

7

Amount (\$)

\$1200

6 Payee address;

City; State; Zip Code

3300 S. 1st St - Austin, Travis Co, Texas

8 Purpose of expenditure

Filing fee

9 -- 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

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