

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS


FORM JC/OH COVER SHEET PG 2

15 C/OH NAME <u>Elena Diaz</u>	16 ACCOUNT # (Ethics Commission files)
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17 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	** This box is for notice of political expenditures by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS

18 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)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 920.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,537.84
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 AFFIDAVIT



DIANA R. CANTU
Notary Public, State of Texas
My Commission Expires 11-10-2008

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Elena Diaz, this the 15th day of July, 2004, 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 2/20/04	5 Payee name Austin Women's Political Caucus	7 Amount (\$) \$100.00
6 Payee address; City; State; Zip Code P.O. Box 12383 Austin, Tx. 78711		
8 Purpose of payment (See instructions regarding type of information required.) Sponsorship-fundraiser "Girls Just Want to have Funds"		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 5/31/04	Payee name LaPrensa Newspaper	Amount (\$) \$150.00
Payee address; City; State; Zip Code P.O. Box 684136 Austin, Tx. 78768		
Purpose of payment (See instructions regarding type of information required.) Cinco de Mayo advertisement		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 4/30/04	Payee name Travis Co. Cinco de Mayo Committee	Amount (\$) \$25.00
Payee address; City; State; Zip Code c/o Margaret Gomez, Co. Commissioner, Pct. 4 314 W. 11th St., Suite 525 Austin, Tx. 78701		
Purpose of payment (See instructions regarding type of information required.) Sponsorship-Cinco de Mayo event		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 6/1/04	Payee name Lone Star Girl Scout Council	Amount (\$) \$100.00
Payee address; City; State; Zip Code 7537 Cameron Road, P.O. Bx. 15385 Austin, Tx. 78761		
Purpose of payment (See instructions regarding type of information required.) Fundraiser sponsorship "Women of Distinction" luncheon		-- 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 <p style="text-align: center;">Elena Diaz</p>		3 ACCOUNT # (Ethics Commission filers)
4 Date <p style="text-align: center;">5/28/04</p>	5 Payee name <p style="text-align: center;">State Bar of Texas Hispanic Issues Section</p>	7 Amount (\$) <p style="text-align: center;">\$100.00</p>
6 Payee address: City: State: Zip Code <p style="text-align: center;">c/o Lulu Flores 816 Congress Ave., Suite 1230, Austin, Tx. 78701</p>		
8 Purpose of payment (See instructions regarding type of information required.) <p>Sponsorship 25 yr. Anniversary Video/Poster project</p>		9 <input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date <p style="text-align: center;">6/6/04</p>	Payee name <p style="text-align: center;">Cristo Rey Church</p>	Amount (\$) <p style="text-align: center;">\$250.00</p>
Payee address: City: State: Zip Code <p style="text-align: center;">2110 E. 2nd St. Austin, Tx. 78702</p>		
Purpose of payment (See instructions regarding type of information required.) <p>Jamaica program ad</p>		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date <p style="text-align: center;">6/11/04</p>	Payee name <p style="text-align: center;">Sam Bisçõe, Special Projects</p>	Amount (\$) <p style="text-align: center;">\$25.00</p>
Payee address: City: State: Zip Code <p style="text-align: center;">314 W. 11th St. Suite 510 Austin, Tx. 78701</p>		
Purpose of payment (See instructions regarding type of information required.) <p>Juneteenth event sponsorship</p>		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date <p style="text-align: center;">6/28/04</p>	Payee name <p style="text-align: center;">No Excuse Marketing</p>	Amount (\$) <p style="text-align: center;">\$55.14</p>
Payee address: City: State: Zip Code <p style="text-align: center;">P. O. Box 180084 Austin, TX 78718</p>		
Purpose of payment (See instructions regarding type of information required.) <p>Supplies</p>		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule G: 1
2 FILER NAME Elena Diaz		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Payee name South Austin Democrats	8 Amount (\$)
2/2/04	6 Payee address; City; State; Zip Code P.O. Box 152592 Austin, Tx. 78715-2592	\$60.00
	7 Purpose of expenditure Lifetime membership dues	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Texas Enviromental Democrats	Amount (\$)
2/2/04	Payee address; City; State; Zip Code 3807 Prairie Ln. Austin, TX 78728	\$10.00
	Purpose of expenditure Annual membership dues	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Hispanic Bar Association of Austin	Amount (\$)
3/27/04	Payee address; City; State; Zip Code 3401 Aldwyche Austin, Tx. 78731	\$20.00
	Purpose of expenditure Chicano Law Students Annual Banquet Sponsorship	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Texas Democratic Party	Amount (\$)
6/18/04	Payee address; City; State; Zip Code 701 Rio Grande Austin, TX 78701	\$25.00
	Purpose of expenditure State Convention Blue Star Breakfast Sponsorship	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure	<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

JUDGE ELENA DIAZ

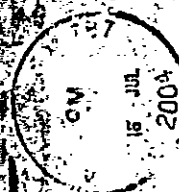
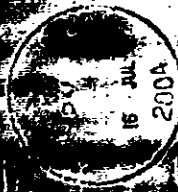
JUSTICE OF THE PEACE, PRECINCT FOUR

2201 W. Rd, Rm. 101
Austin, Texas 78704-4900

FOR RECORD

2006 JUL 16 AM 11:37

DANA DeBEAUVOIR
COUNTY CLERK
TRAVIS COUNTY, TEXAS



DANA DeBEAUVOIR
County Clerk
P. O. Box 149325