JUDICIAL SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

5907

FORM JSPAC
COVER SHEET PG 1

The JSPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 3

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 COMMITTEE NAME

Friends of Judge David Crain

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX | APT / SUITE #. | CITY | STATE | ZIP CODE

c/o Charles O. Grigson
604 W. 12th Street
Austin, Texas 78701

5 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST | MI

Charles O. Grigson

NICKNAME | LAST | SUFFIX

6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE) | APT / SUITE #. | CITY | STATE | ZIP CODE

604 W. 12th Street
Austin, Texas 78701

7 CAMPAIGN TREASURER'S MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX: | APT / SUITE #. | CITY. | STATE. | ZIP CODE

604 W. 12th Street
Austin, Texas 78701

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(512) 477-5791

9 REPORT TYPE

- [XX] January 15
- [ ] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] Dissolution (attach JSPAC-DR)
- [ ] 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 7 / 01 / 2004 THROUGH Month Day Year: 12 / 31 / 2004

11 ELECTION

ELECTION DATE Month Day Year: / /

ELECTION TYPE

☐ Primary ☐ Runoff ☐ General ☐ Special

GO TO PAGE 2

JUDICIAL SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM JSPAC
COVER SHEET PG 2

12 COMMITTEE NAME

ACCOUNT # (Ethics Commission filers)

Friends of Judge David Crain

13 COMMITTEE PURPOSE

(Attach lists on plain paper to complete this report if necessary.)

[XX] SUPPORT

[ ] OPPOSE

[ ] ASSIST (officeholders only)

[ ] CANDIDATE

[XX] OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME

David F. Crain, Judge, County Court at Law No. 3
Travis County, Texas

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

Judge, County Court at Law No. 3
Travis County, Texas

14 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	$ 615.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 19,534.74
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

15 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.

GWYNN CARTER CLARK
MY COMMISSION EXPIRES
March 11, 2005

Charles O. Grigson
Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said CHARLES O. GRIGSON, this the 14th day of JANUARY, 20 05, to certify which, witness my hand and seal of office.

Gwynn Carter Clark — Gwynn Carter Clark — Notary

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1

2 FILER NAME: Friends of Judge David Crain

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
7/13/2004	Travis County Democratic Party P.O. Box 684263 Austin, Texas 78768	$ 500.00

8 Purpose of payment (See instructions regarding type of information required.): contribution to party

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
8/03/2004	AFL-CIO P.O. Box 684644 Austin, Texas 78768	$ 115.00

Purpose of payment (See instructions regarding type of information required.): Labor Day Program

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.):

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.):

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED