

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6008

FORM JC/OH
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00033144	2 Total pages filed: 12
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI John C. D.	OFFICE USE ONLY Date Received: NOV 14 2005 2:05 PM Date Hand-delivered or Date Postmarked: NOV 14 2005 2:05 PM Receipt # Amount: Date Processed: Date Imaged:	
	NICKNAME LAST SUFFIX Drolla Jr.		
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2005 South Oak Canyon Road Austin, Texas 78746		
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI John C. D.		
	NICKNAME LAST SUFFIX Drolla Jr.		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 512 East Riverside Drive, Suite 200, The Town Lake Building Austin, Texas 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 445,6838		
8 REPORT TYPE.	<input 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year MONTH DAY YEAR 01 / 10 / 05 THROUGH 07 / 15 / 05		
10 ELECTION	ELECTION DATE Month Day Year 11 / 7 / 00	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) None	12 OFFICE SOUGHT (if known) Previously sought 53rd District Court	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	<p>.. 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. ..</p> <p>Name _____</p> <p>Address / PO Box; Apt. / Suite #; City; State; Zip Code _____</p>		

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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 1	
2 FILER NAME John C. D. Droila, Jr.		3 ACCOUNT # (Ethics Commission filers) 00033144	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address: City: State: Zip Code	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation		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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address: City: State: Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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 (ID#: _____) Contributor address: City: State: Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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): 1 of 1	
2 FILER NAME John C. D. Drolla, Jr.		3 ACCOUNT # (Ethics Commission filers) 00033144	
4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$ — 0 —	
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) John C. D. Drolla, Jr.	9 Loan Amount (\$)	
6 Is lender a financial institution? <input checked="" type="radio"/> Y <input checked="" type="radio"/> N	8 Lender address: City: State: Zip Code 2005 South Oak Canyon Road Austin, Texas 78746	10 Interest rate 0%	
12 Lender's Principal Occupation Attorney		13 Lender's Job Title Attorney	
14 Lender's Employer/Law Firm Law Offices of John C. D. Drolla, Jr.		15 Law Firm of lender's spouse (if any) N/A	
16 If lender is child, law firm of parent(s) (if any) N/A			
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 MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages this Schedule G: <u>1 of 1</u>
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2 FILER NAME <u>John C. D. Droll, Jr.</u>	3 ACCOUNT # (Ethics Commission Filer) <u>00033144</u>
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4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	7 Purpose of expenditure	<input 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

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure	<input 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

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

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule I:

1 of 1

2 FILER NAME

John C. D. Drolla, Jr.

3 ACCOUNT # (Ethics Commission filers)

00033144

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	7 Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

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OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form. 1 Total pages (this Schedule L):
1 of 1

2 FILER NAME John C. D. Drolla, Jr. 3 ACCOUNT # (Ethics Commission #) 00033144

LENDER INFORMATION 4 Name of lender
 5 Lender address; City; State; Zip Code

GUARANTOR INFORMATION 6 Name of guarantor
 not applicable 7 Guarantor address; City; State; Zip Code

LENDER INFORMATION Name of lender
John C. D. Drolla, Jr.
 Lender address; City; State; Zip Code
2005 South Oak Canyon Road, Austin, Texas 78746

GUARANTOR INFORMATION Name of guarantor
 not applicable Guarantor address; City; State; Zip Code

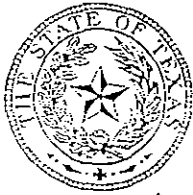
LENDER INFORMATION Name of lender
 Lender address; City; State; Zip Code

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



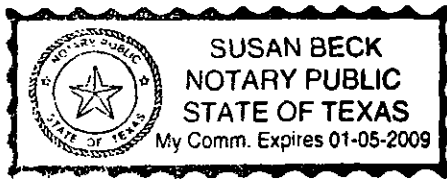
AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

OFFICE USE ONLY	
Date Received	7/15/05
Date Hand-delivered or Date Postmarked	7/15/05
Date Processed	7/15/05
Date Imaged	

Filer name <u>John C. D. Drolla, Jr.</u>	Account # <u>00033144</u>
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- I swear or affirm that I have not accepted more than \$20,000 in political contributions or made more than \$20,000 in political expenditures in a calendar year.
- I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$20,000 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I am filing this affidavit with the JC/OH report due on 15 JUL 05. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.



John C. D. Drolla, Jr.
Signature of Candidate or Officeholder

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Susan Beck this the 12th day of July 20 05, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Susan Beck
Print name of officer administering oath

Legal Assistant
Title of officer administering oath

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER.