

(original)

CORRECTION AFFIDAVIT

FORM COR-C/OH

FOR CANDIDATE/OFFICEHOLDER 6093

1	ACCOUNT # 00041208	2	PAGE # 1 of 6
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3	CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR NICKNAME	FIRST Julie Harris LAST Kocurek	MI SUFFIX	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Legal Date Processed Date Imaged	
	4	ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election	<input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> Final Report		<input type="checkbox"/> Other (specify)
5	ORIGINAL PERIOD COVERED	Month Day Year	07/01/2005	THROUGH	Month Day Year	12/31/2005

6 EXPLANATION OF CORRECTION

I mistakenly put the purpose of the expense as the Austin Bar and Grille sponsorship. The expenditure was actually for Austin Bar Association Dues.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

AFFIX NOTARY STAMP / SEAL ABOVE

Julie Kocurek
Julie Kocurek
Judge Julie Kocurek

Signature of Candidate or Officeholder

Sworn to and subscribed before me by Julie Kocurek this the 13th day of JAN, 2006, to certify which, witness my hand and seal of office.

Stella A. Sanchez
Signature of officer administering oath

Stella A. Sanchez
Printed name of officer administering oath

Notary
Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Kocurek, Julie Harris

15 ACCOUNT # (Ethics Commission filers)
00041208

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of 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. ..

<input type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
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EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	50.00
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4.	TOTAL POLITICAL EXPENDITURES	\$	200.00
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CONTRIBUTION BALANCE

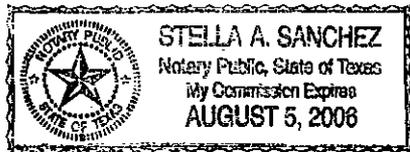
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	73,801.52
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OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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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.



Julie Kocurek
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JULIE Kocurek, this the 13th day of JAN, 20 06, to certify which, witness my hand and seal of office.

Stella A. Sanchez
Signature of officer administering oath

Stella A. Sanchez
Print name of officer administering oath

Notary
Title of officer administering oath

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/2 Report: 5/6

2 FILER NAME Kocurek, Julie Harris

3 ACCOUNT # (Ethics Commission filers)
00041208

4 Date	5 Payee name	8 Amount (\$)
10/24/2005	Austin Bar Association 6 Payee address; City; State; Zip Code 816 Congress Avenue Suite 700 Austin, TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Austin Bar Association Dues.	\$140.00
09/12/2005	Payee name Casis PTA Payee address; City; State; Zip Code Casis Elementary 2710 Exposition Austin, TX 78703 Purpose of expenditure (See instructions regarding type of information required.) Sponsorship for school fundraising event	\$500.00
07/15/2005	Payee name Hale, Debra (Ms.) Payee address; City; State; Zip Code Blackwell Criminal Justice Center 509 W 11th Street Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Cookies and Refreshments for the Mental Health Training Seminar	\$15.00
07/05/2005	Payee name State Bar of Texas --- Judicial Section Payee address; City; State; Zip Code 400 West 15th Street Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Judicial Section Dues	\$30.00
12/22/2005	Payee name Taste of Texas Beaumont Barbeque Payee address; City; State; Zip Code 2016 Charlotte Way Round Rock, TX 78664 Purpose of expenditure (See instructions regarding type of information required.) Christmas luncheon for staff.	\$129.00

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 6/6

2 FILER NAME Kocurek, Julie Harris

3 ACCOUNT # (Ethics Commission filers)
00041208

4 Date 09/19/2005	5 Payee name Texas District Judges Association	8 Amount (\$) \$10.00
	6 Payee address; City; State; Zip Code PO Box 308 Karnes City, TX 78118	
7 Purpose of expenditure (See instructions regarding type of information required.) Dues for 2005-2006		

Date 10/27/2005	Payee name West Austin Youth Association	Amount (\$) \$300.00
	Payee address; City; State; Zip Code 1314 Exposition Blvd. Austin, TX 78703	
Purpose of expenditure (See instructions regarding type of information required.) Golf tournament sponsorship		

POLITICAL EXPENDITURES

SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 4/6

2 FILER NAME Kocurek, Julie Harris

3 ACCOUNT # (Ethics Commission filers)
00041208

4 Date	5 Payee name	7 Amount (S)
07/08/2005	Lake Travis Republican PAC 6 Payee address; City; State; Zip Code PO Box 340033 Austin, TX 78734	\$150.00

8 Purpose of payment (See instructions regarding type of information required.)
Golf Scramble Sponsorship

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

Office sought:
Office held: