

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6098

FORM JC/OH
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00054704

2 PAGE #
1 of 5

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Hon. Gisela
NICKNAME LAST SUFFIX
Triana

OFFICE USE ONLY

Date Received: 06 JAN 13 PM 4:23
Date Hand-delivered or Date Postmarked

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
5504 Fort Benton Drive
Austin, TX 78735

Change of Address

Receipt # Amount
Date Processed
Date Imaged

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Karl
NICKNAME LAST SUFFIX
Bayer

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
5504 Fort Benton Drive
Austin, TX 78735

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 698-4168

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
07/01/2005 12/31/2005

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
 Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)
District Judge District 200

12 OFFICE SOUGHT (if known)

13 NOTICE OF
DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

... 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

additional pages

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM **JC/OH**
COVER SHEET PG 2

14 C/OH NAME Triana, Gisela (Hon.)

15 ACCOUNT # (Ethics Commission filers)
00054704

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

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 \$ 115.00

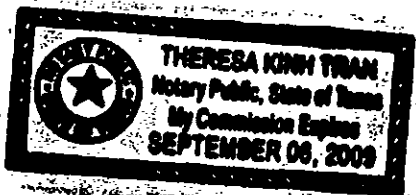
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 651.57

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 35,000.00

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.

Gisela D. Triana
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gisela D. Triana, this the 13th day of January, 2006, to certify which, witness my hand and seal of office.

JW Signature of officer administering oath
Theresa Kim Tran Print name of officer administering oath
Court Operations Officer Title of officer administering oath

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 3/5**2 FILER NAME** Triana, Gisela (Hon.)**3 ACCOUNT #** (Ethics Commission filers)
00054704**4 Date****5 Payee name**
AFL-CIO**7 Amount**
(S)

09/25/2005

6 Payee address; City; State; Zip Code1016 La Posada #285
Austin, TX 78752

\$115.00

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

Labor Day Ad

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:
Office held:

OUTSTANDING LOANS

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/2 Report: 4/5

2 FILER NAME Triana, Gisela (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00054704

LENDER INFORMATION

4 Name of lender
Davidson, Elizabeth
Austin, TX
5 Lender address; City; State; Zip Code

GUARANTOR INFORMATION

6 Name of guarantor
7 Guarantor address; City; State; Zip Code

not applicable

LENDER INFORMATION

Name of lender
Delgado, Armando
Houston, TX 77042
Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor
Guarantor address; City; State; Zip Code

not applicable

LENDER INFORMATION

Name of lender
Dorta, Robert
Houston, TX 77475
Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor
Guarantor address; City; State; Zip Code

not applicable

LENDER INFORMATION

Name of lender
Oden, Ken
Austin, TX 78703
Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor
Guarantor address; City; State; Zip Code

not applicable

OUTSTANDING LOANS

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

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

2 FILER NAME Triana, Gisela (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00054704

LENDER INFORMATION

4 Name of lender
Triana, Gisela
Austin, TX 78735
5 Lender address; City; State; Zip Code

GUARANTOR INFORMATION

6 Name of guarantor
7 Guarantor address; City; State; Zip Code

not applicable

LENDER INFORMATION

Name of lender
Triana, Michael
San Antonio, TX 78261
Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor
Guarantor address; City; State; Zip Code

not applicable