

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6532

FORM JC/OH  
COVER SHEET PG 1

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

1 ACCOUNT #  
(Ethics Commission filers)  
00054142

2 PAGE #  
1 of 3

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI  
Hon. Stephen  
NICKNAME LAST SUFFIX  
Yelenosky

OFFICE USE ONLY

Date Received  
Date Hand-delivered or Date Postmarked  
RECEIVED  
JUL 12 PM 12:16  
COUNTY CLERK  
KIM C. HUFFY, TEXAS

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
709 Bouldin  
Austin, TX 78704-1609

Change of Address

Receipt # Amount

5 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Ms. Betty  
NICKNAME LAST SUFFIX  
Torres

Date Processed

Date Imaged

6 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
11142 Pinehurst  
Austin, TX 78747

7 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(512) 292-0560

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  
01/01/2007 06/30/2007

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  
11/04/2004  Primary  Runoff  General  Special

11 OFFICE

OFFICE HELD (if any)  
District Judge District 345

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 Yelenosky, Stephen (Hon.)

15 ACCOUNT # (Ethics Commission files)  
00054142

**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. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

**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 \$ 100.00

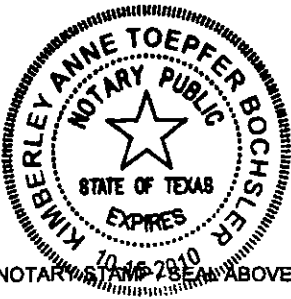
**CONTRIBUTION BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 5,724.82

**OUTSTANDING LOAN TOTALS**

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

**18 AFFIDAVIT**



AFFIX NOTARY STAMP ABOVE

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.

Stephen Yelenosky  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Stephen Yelenosky, this the 10<sup>th</sup> day of July, 20 07, to certify which, witness my hand and seal of office.

Kimberley Anne Toepfer-Bochsler  
Signature of officer administering oath

Kimberley Anne Toepfer-Bochsler  
Print name of officer administering oath

Texas Notary Public  
Title of officer administering oath

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 1/1 Report: 3/3

2 FILER NAME Yelenosky, Stephen (Hon.)

3 ACCOUNT # (Ethics Commission filers)  
00054142

4 Date	5 Payee name Cinco de Mayo Committee	7 Amount (\$)
04/24/2007	6 Payee address; City; State; Zip Code 314 W. 11th Street #525 Austin, TX 78701	\$25.00

8 Purpose of payment (See instructions regarding type of information required.) advertisement  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date	Payee name Sam Biscoe Special Projects - Juneteenth Celebration	Amount (\$)
05/17/2007	Payee address; City; State; Zip Code 314 W. 11th Street #520 Austin, TX 78701	\$25.00

Purpose of payment (See instructions regarding type of information required.) advertisement  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date	Payee name Travis County Women Lawyers Foundation	Amount (\$)
06/15/2007	Payee address; City; State; Zip Code P.O.BOX 684683 Austin, TX 78768-4683	\$50.00

Purpose of payment (See instructions regarding type of information required.) awards luncheon/contribution  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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