

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6534

FORM JC/OH
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00037566	2 PAGE # 1 of 4
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms. FIRST Lora MI NICKNAME LAST Livingston SUFFIX	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received: JUL 12 PM 2:37 Date Hand-delivered or Date Postmarked: Receipt # Amount Date Processed Date Imaged </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 111 Congress Avenue, Suite 1400 Austin, TX 78701		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. FIRST Thomas H. MI NICKNAME LAST Watkins SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 111 Congress Avenue, Suite 1400 Austin, TX 78701		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 703-5765		
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 THROUGH Month Day Year 01/01/2007 06/30/2007		
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge District 261	12 OFFICE SOUGHT (if known)	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... 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		

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

14 C/OH NAME Livingston, Lora (Ms.)

15 ACCOUNT # (Ethics Commission Filers)
00037566

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

\$ 495.00

CONTRIBUTION BALANCE

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

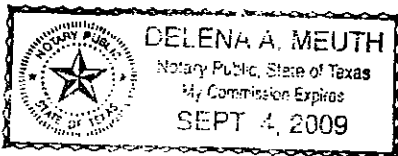
\$ 9,604.53

OUTSTANDING LOAN TOTALS

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

\$ 0.00

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.

[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lora J. Livingston, this the 12th day of July, 2007, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Delena A. Meuth
Print name of officer administering oath

Paralegal
Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 3/4
2 FILER NAME Livingston, Lora (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00037566
4 Date 05/15/2007	5 Payee name Annie's List 6 Payee address; City; State; Zip Code P.O. Box 699 Austin, TX 78767	7 Amount (\$) \$100.00
8 Purpose of payment (See instructions regarding type of information required.) 4th Annual Austin Luncheon (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:
Date 04/12/2007	Payee name Austin-Travis County Cindo de Mayo Committee Payee address; City; State; Zip Code 314 W. 11th Street, Suite 500 Austin, TX 78701	Amount (\$) \$25.00
Purpose of payment (See instructions regarding type of information required.) Contribution to Travis County Cinco de Mayo Celebration (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:
Date 04/12/2007	Payee name Central Texas Democratic Forum Payee address; City; State; Zip Code 1105 W. 12th Street Austin, TX 78703	Amount (\$) \$120.00
Purpose of payment (See instructions regarding type of information required.) Annual Membership Dues (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:
Date 04/12/2007	Payee name Girl Scouts - Lone Star Council Payee address; City; State; Zip Code 12012 Park Thirty-Five Circle Austin, TX 78753	Amount (\$) \$125.00
Purpose of payment (See instructions regarding type of information required.) 2007 Women of Distinction Luncheon (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:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2 Report: 4/4
2 FILER NAME Livingston, Lora (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00037566
4 Date 04/12/2007	5 Payee name Precinct 5 Constable's Association 6 Payee address; City; State; Zip Code 1003 Guadalupe Austin, TX 78701	7 Amount (\$) \$50.00
8 Purpose of payment (See instructions regarding type of information required.) Contribution to E. Barrientos Farewell Retirement Party (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:
Date 05/15/2007	Payee name Sam Biscoe Special Projects Payee address; City; State; Zip Code 314 W. 11th Street, Suite 520 Austin, TX 78702	Amount (\$) \$25.00
Purpose of payment (See instructions regarding type of information required.) Contribution to 2007 Juneteenth Celebration (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:
Date 06/04/2007	Payee name Travis County Women Lawyer's Foundation Payee address; City; State; Zip Code P.O. Box 1386 Austin, TX 78767	Amount (\$) \$50.00
Purpose of payment (See instructions regarding type of information required.) Ticket to 2007 Annual Awards and Grants Luncheon (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: