

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 <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		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 \$ 7,625.00

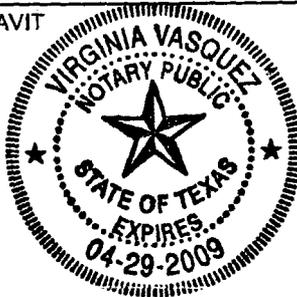
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,588.41

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.

Julie H. Kocurek
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Julie H. Kocurek, this the 1st day of July, 20 08, to certify which, witness my hand and seal of office.

Virginia Vasquez
Signature of officer administering oath

Virginia Vasquez
Print name of officer administering oath

Judicial Aide Specialist
Title of officer administering oath

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 3/4**2** FILER NAME Kocurek, Julie Harris**3** ACCOUNT # (Ethics Commission filers)
00041208**4** Date

01/06/2008**5** Payee name
Austin Tejano Democrats**7** Amount
(\$)

\$125.00**6** Payee address; City; State; Zip Code
2544 Stoutwood Circle
Austin, TX 78745**8** Purpose of payment (See instructions regarding type of information required.)

Sponsorship/Ad

(If travel outside of Texas, complete Schedule T) **9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Travis County Democratic PartyAmount
(\$)

05/12/2008

Payee address; City; State; Zip Code
P.O. Box 684263
Austin, TX 78768

\$7,500.00

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

Coordinated Campaign

(If travel outside of Texas, complete Schedule T) **9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

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

2 FILER NAME: Kocurek, Julie Harris

3 ACCOUNT # (Ethics Commission filers)
00041208

4 Date	5 Payee name	8 Amount (\$)
05/14/2008	Do The Wrote Thing 6 Payee address; City; State; Zip Code 2515 South Congress Ave. Attention: Sylvia Mendoza Austin, TX 78704 7 Purpose of expenditure (See instructions regarding type of information required.) Contribution for Student Outreach PProgram	\$500.00
03/25/2008	Payee name Ozarka Natural Spring Water Payee address; City; State; Zip Code #215 661 Dixie Highway, Suite 4 Louisville, KY 40258 Purpose of expenditure (See instructions regarding type of information required.) Office Supplies	\$178.68
03/25/2008	Payee name Travis County Women Lawyers' Foundation Payee address; City; State; Zip Code P.O. Box 1386 Austin, TX 78767 Purpose of expenditure (See instructions regarding type of information required.) Sponsorship for Scholarship Luncheon	\$125.00
02/16/2008	Payee name Visa- Chase Card Services Payee address; City; State; Zip Code P.O. Box 15298 Wilmington, DE 19850 Purpose of expenditure (See instructions regarding type of information required.) Office Supplies	\$97.40