

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7194

FORM JC/OH  
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00026774	2 PAGE # 1 of 3
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Hon.	FIRST Suzanne	MI MI
	NICKNAME	LAST Covington	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS : PO BOX	APT / SUITE #	CITY STATE ZIP CODE
	P.O. Box 1748 Austin, TX 78767		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Karen	MI MI
	NICKNAME	LAST Barioletti	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE # CITY STATE ZIP CODE		
	401 Congress Avenue, Suite 2200 Austin, TX 78701		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(512) 480-5612			
8 REPORT TYPE	<input checked="" 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 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
07/01/2009		12/31/2009	
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 201	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		

DANA DEBEAUVILLE  
 COUNTY CLERK  
 TRAVIS COUNTY

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Date Postmarked

Receipt #    Amount

Date Processed

Date Imaged

10  
 JAN 6  
 FILED FOR REPORT

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Covington, Suzanne (Hon.)

15 ACCOUNT # (Ethics Commission filers)  
00026774

### 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 \$ 300.00

### CONTRIBUTION BALANCE

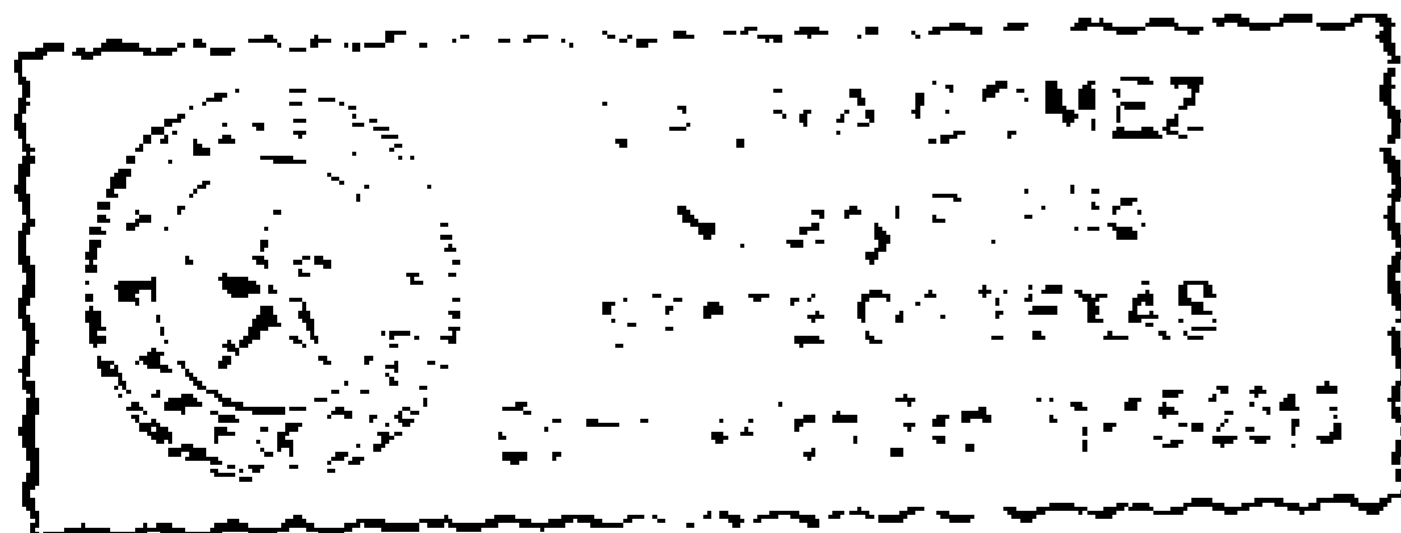
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 33,468.06

### 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.



*Suzanne Covington*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Suzanne Covington, this the 5th day of January, 2010, to certify which, witness my hand and seal of office.

*Laura Gomez*  
Signature of officer administering oath

Laura Gomez  
Print name of officer administering oath

Judicial Aide  
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** Covington, Suzanne (Hon.)

**3 ACCOUNT #** (Ethics Commission filers)  
00026774

**4 Date**  
  
10/05/2009

**5 Payee name**  
Texas Access to Justice Foundation

**7 Amount (\$)**  
  
\$200.00

**6 Payee address:** City: State: Zip Code  
P.O. Box 12886  
Austin, TX 78711-2886

**8 Purpose of payment** (See instructions regarding type of information required.)  
In Memory of Emily Jones

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date

Payee name  
Volunteer Legal Services

Amount (\$)  
  
\$100.00

10/05/2009

Payee address: City: State: Zip Code  
816 Congress Avenue, Suite 701  
Austin, TX 78701-2665

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

Phon-A-Thon Contribution

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held: