

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7716

## FORM JC/OH COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 01111111		2 PAGE # 1 of 7	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Eric	MI		
	NICKNAME	LAST Shepperd	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE
	11412 Camelian Drive Austin, TX 78739				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Beverly	MI		
	NICKNAME	LAST Reeves	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE
	221 West Sixth Street Suite 1000 Austin, TX 78701-3410				
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 344-4500	EXTENSION		
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
07/01/2011		12/31/2011			
10 ELECTION	ELECTION DATE Month Day Year			ELECTION TYPE	
				<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
11 OFFICE	OFFICE HELD (if any) County Court At Law #2			12 OFFICE SOUGHT (if known)	
<b>GO TO PAGE 2</b>					

<b>OFFICE USE ONLY</b>	
Date Received	
FILED FOR RECORD	
12 JAN 11 12:05	
Date Hand-delivered or Date Postmarked	
Receipt #	
Amount	
Date Processed	
Date Imaged	

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME Shepperd, Eric (Mr.)

14 ACCOUNT # (Ethics Commission filers)  
01111111

15 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

16 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 \$100 OR LESS, UNLESS ITEMIZED **\$ 0.00**

4. TOTAL POLITICAL EXPENDITURES **\$ 2,862.75**

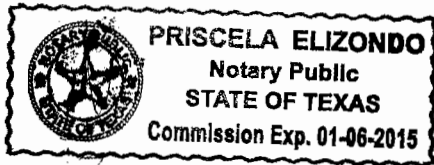
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 2,174.66**

OUTSTANDING LOAN TOTALS

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

17 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 Priscela Elizondo this the 17<sup>th</sup> day of January, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

**POLITICAL EXPENDITURES** **SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
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**The INSTRUCTION GUIDE explains how to complete this form.**

<b>1 PAGE #</b> Schedule: 1/5 Report: 3/7	<b>2 FILER NAME</b> Shepperd, Eric (Mr.)	<b>3 ACCOUNT # (TEC filers)</b> 01111111
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<b>4 Date</b> 12/09/2011	<b>5 Payee name</b> Alpha SDA Church
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<b>6 Amount (\$)</b> \$200.00	<b>7 Payee address City; State; Zip Code</b> 3016 East 51st Street Austin, TX 78723
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<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship - Women's Retreat (Check #1057)
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 08/09/2011	<b>Payee name</b> Austin AFL-CIO
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<b>Amount (\$)</b> \$100.00	<b>Payee address City; State; Zip Code</b> 1106 Lavaco Street Austin, TX 78701-2169
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship - Labor Day Ad (Check #1121)
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 08/09/2011	<b>Payee name</b> Austin AFL-CIO
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<b>Amount (\$)</b> \$235.00	<b>Payee address City; State; Zip Code</b> 1106 Lavaco Street Austin, TX 78701-2169
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship - Annual Fish Fry (Check #1120)
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 08/09/2011	<b>Payee name</b> Austin Black Lawyers Association
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<b>Amount (\$)</b> \$125.00	<b>Payee address City; State; Zip Code</b> P O Box 13321 Austin, TX 78711
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship - Golf Tournament (Check #1124)
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 2/5 Report: 4/7	<b>2</b> FILER NAME Shepperd, Eric (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 01111111
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<b>4</b> Date 09/21/2011	<b>5</b> Payee name Capital Area Democrats
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<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address City; State; Zip Code P O Box 801 Austin, TX 78767
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser (Check #1043)
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/23/2011	Payee name Central Texas Democratic Forum
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Amount (\$) \$120.00	Payee address City; State; Zip Code P O Box 801 Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Dues (Check #1040)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/28/2011	Payee name Check Mark Typesetting
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Amount (\$) \$24.90	Payee address City; State; Zip Code 3217 N IH 35 Austin, TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> NAACP Ad (Check #1147)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/26/2011	Payee name Hispanic Bar Association of Austin
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Amount (\$) \$250.00	Payee address City; State; Zip Code P O Box 12692 Austin, TX 78711-2692
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship - Luncheon Event (Check #1046)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 3/5 Report: 5/7		<b>2</b> FILER NAME Shepperd, Eric (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 01111111	
<b>4</b> Date 11/25/2011		<b>5</b> Payee name NAACP			
<b>6</b> Amount (\$) \$150.00		<b>7</b> Payee address City; State; Zip Code 1704 East 12th Street Austin, TX 78701			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship (Check #1056)	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/29/2011		Payee name NAACP			
Amount (\$) \$65.00		Payee address City; State; Zip Code 1704 East 12th Street Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Ticket (Check #1146)	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/03/2011		Payee name Off the Mark - Lynn Reznick			
Amount (\$) \$140.00		Payee address City; State; Zip Code 16 Slayton Road Melrose, MA 02176			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> License to use cartoon (Check #1044)	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/17/2011		Payee name Parsons, James (Mr.)			
Amount (\$) \$100.00		Payee address City; State; Zip Code P O Box 12548 Austin, TX 78711-2548			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography (Check #1125)	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 4/5 Report: 6/7		<b>2</b> FILER NAME Shepperd, Eric (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 01111111	
<b>4</b> Date 11/25/2011		<b>5</b> Payee name Shepperd, Eric (Mr.)			
<b>6</b> Amount (\$) \$153.00		<b>7</b> Payee address City; State; Zip Code 11412 Camelian Drive Austin, TX 78739			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursement - Vista Print Cards (Check #1054)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/07/2011		Payee name South Austin Democrats			
Amount (\$) \$250.00		Payee address City; State; Zip Code P O Box 152592 Austin, TX			
<b>8</b> PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Sponsorship - Yellow Dawg Democrat (Check #1145)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/09/2011		Payee name Stephens, Bridget (Ms.)			
Amount (\$) \$500.00		Payee address City; State; Zip Code 2000 South Lakeline Boulevard #437 Cedar Park, TX 78613			
<b>8</b> PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Services (Check #1058)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/16/2011		Payee name Texas Association County Court At Law			
Amount (\$) \$35.00		Payee address City; State; Zip Code P O Box 2131 Austin, TX 78768-2131			
<b>8</b> PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Dues (Check #1045)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/5 Report: 7/7		<b>2</b> FILER NAME Shepperd, Eric (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 01111111	
<b>4</b> Date 12/01/2011		<b>5</b> Payee name USPS			
<b>6</b> Amount (\$) \$124.80		<b>7</b> Payee address City; State; Zip Code 1914 East 6th Street Austin, TX 78701			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage (Check #1148)	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2011		Payee name Worley Printing			
Amount (\$) \$40.05		Payee address City; State; Zip Code 3217 North IH-35 Austin, TX			
<b>8</b> PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Wedding Postcards (Check #1047)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	