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FOR OFFICE USE ONLY

File # _____

1-16-91
cah

Please complete:

Total Pages in this Report 4

Total Pages of Contributions Only 2

CANDIDATE/OFFICEHOLDER SWORN REPORT OF CONTRIBUTIONS AND EXPENDITURES

(Title 15, Texas Election Code)

PM	HD
	✓

Full Name of Candidate or Officeholder <i>June Jackson</i>	Address of Candidate or Officeholder <i>P. O. Box 571, Hempstead, Tx 77445</i>
Office Held' <i>Office sought</i>	Office Sought' <i>Judge, Waller County Court at Law</i>
Name of Campaign Treasurer' <i>William F. Jackson, Jr.</i>	Residence or Business Street Address of Campaign Treasurer
Telephone Number of Campaign Treasurer <i>(409) 826-2550</i>	Date of Election, if applicable
	Type of Election, if applicable <i>Democratic Primary (and run-off election)</i>

For the period July 1, 1990, through January 15, 1991

Type of Report (Check the appropriate box):

- | | |
|--|--|
| <input type="checkbox"/> 30th day before an election ^{4.5}
<input type="checkbox"/> 8th day before an election ^{4.6}
<input type="checkbox"/> 8th day before a runoff ^{4.7}
<input type="checkbox"/> July 15 ⁸
<input type="checkbox"/> January 15 ⁹
<input checked="" type="checkbox"/> Final Report (Attach Part X-05) ¹⁰
<input type="checkbox"/> 48 hr. Report Required by Modified Reporting Procedure (Sec. 254.183(b), Texas Election Code) ¹¹ | <input type="checkbox"/> 15th day after appointment of campaign treasurer by an officeholder ¹²
<input type="checkbox"/> Annual Report of Unexpended Contributions ¹³
<input type="checkbox"/> Amended Report ¹⁴ _____
(Specify type of report you are amending) |
|--|--|

}

Total of Unexpended Political Contributions as of December 31: \$ _____
 Amount of Interest or Other Income Earned During Calendar Year: \$ _____

COMPLETE THE FOLLOWING, if applicable: I have been notified by the following that they accept political contributions or they make political expenditures for me. (Tex. Elec. Code Ann. secs. 254.061(3), (4); 254.091(2)) Attach additional pages if necessary.

Full Name and Address of Political Committee. State whether the committee is a general-purpose (GP) or specific-purpose (SP) committee.	Full Name and Address of the Committee's Campaign Treasurer

If no reportable activity occurred during this reporting period, indicate that fact below; you may then proceed to Part X-04 and complete the affidavit. If activity occurred, continue with Parts X-02, X-03, and X-04.

NO REPORTABLE ACTIVITY OCCURRED DURING THIS REPORTING PERIOD.

See Reverse Side for Footnotes and Instructions

**CANDIDATE/OFFICEHOLDER
CONTRIBUTIONS AND
LOANS FROM FINANCIAL INSTITUTIONS**

Name of Candidate/Officeholder: *June Jackson*

Date	CONTRIBUTOR Full Name and Complete Address	Enter the amount of the contribution(s) in the appropriate column.		
		Money or Equivalent (1)	Loans of Money (other than from financial institutions) (2)	Market Value and Description of gifts, use of property, or services (in-kind contributions) (3)
	<i>NONE</i>	<i>NONE</i>	<i>NONE</i>	<i>NONE</i>
TOTAL		<i>NONE</i>	<i>NONE</i>	<i>NONE</i>

LOANS FROM FINANCIAL INSTITUTIONS (Tex. Elec. Code Ann. secs. 254.031(a)(2), 251.001(2))

Date of Loan	Full Name of Financial Institution and Guarantor(s) (if applicable)	Interest Rate (If below prime)	Amount of Loan (4)
	<i>NONE</i>	<i>NONE</i>	<i>NONE</i>
TOTAL			<i>NONE</i>

NOTE: If you accept a contribution from an out-of-state political committee, you must comply with the provisions of section 253.032, Texas Election Code. The provisions of this section are outlined in the instructions on the reverse side.

See Instructions on Reverse Side

**CANDIDATE/OFFICEHOLDER
EXPENDITURES AND PAYMENTS**

Name of Candidate/Officeholder: *June Jackson*

Date	Payee or Creditor Full Name, Complete Address	Purpose of Expenditure or Payment (be specific)	Enter the amount of the expenditure or payment in the appropriate column.		
			Cash disbursements and unpaid bills (except loans) not previously reported (1)	Repayments of loans of money (2)	Payments that were not political expenditures * (Tex. Elec. Code Ann. sec. 254.031(a)(4)) (3)
	<i>NONE</i>		<i>NONE</i>	<i>NONE</i>	<i>NONE</i>
TOTAL			<i>none</i>	<i>none</i>	<i>NONE</i>

*"Payments that were not political expenditures" are payments that were not involved in an election or in the performance of officeholder duties or activities but were made from political contributions.

See Instructions on Reverse Side

CANDIDATE/OFFICEHOLDER CONTRIBUTIONS AND EXPENDITURE TOTALS

Name of Candidate/Officeholder: June Jackson

TOTALS

Contributions (NONE)		Expenditures (NONE)	
1. Total from Column (1), Part X-02 (Money or Equivalent)	\$ _____	8. Total from Column (1), Part X-03 (Cash disbursements & unpaid bills, except loans)	\$ _____
2. Total from Column (2), Part X-02 (Loans of Money other than from Financial Institutions)	\$ _____	9. Total from Column (2), Part X-03 (repayments of loans of money)	\$ _____
3. Total from Column (3), Part X-02 (market value of gifts, services, use of property) ¹	\$ _____	10. Total from Line 3 of contributions total (across) ¹	\$ _____
4. Total Contributions of \$50 and less (include money, gifts, services, use of property, and loans of money)	\$ _____	11. Total Expenditures of \$50 and less (including money, gifts, services, use of property and repayments of loans)	\$ _____
5. Total Contributions for this reporting period (add lines 1, 2, 3, and 4)	\$ _____	12. Total Expenditures for this reporting period (add lines 8, 9, 10, and 11)	\$ _____
6. Total from Column (4), Part X-02 (Loans from Financial Institutions) (optional)	\$ _____	13. Total from Column (3), Part X-03 (payments that were not expenditures) (optional)	\$ _____
7. Total Contributions and Loans for this reporting period (add lines 5 and 6) (optional)	\$ <u>NONE</u>	14. Total Expenditures and Payments for this reporting period (add lines 12 and 13) (optional)	\$ <u>NONE</u>

AFFIDAVIT ²

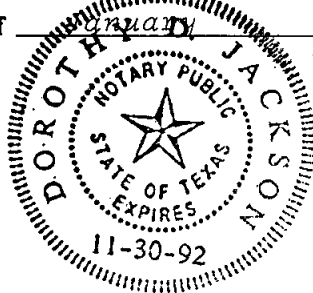
State of Texas
County of Waller

Before me, the undersigned authority, on this day personally appeared June Jackson who being by me here and now duly sworn, upon oath says: "I swear, or affirm, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code."

TREASURER OF CANDIDATE
IS NOT AUTHORIZED TO SIGN
FOR CANDIDATE

June Jackson
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said June Jackson, on the 15th day of January, 1997, to certify which, witness my hand and seal of office



Dorothy D. Jackson
Signature of officer administering oath ³

DOROTHY D. JACKSON
Print name of officer administering oath

NOTARY PUBLIC, STATE OF TX
Print title of officer administering oath (as listed in footnote 3 on back)

See Reverse Side for Footnotes

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FOR OFFICE USE ONLY	
File # _____	
RECEIVED JAN 16 1991 <i>ld</i>	
PM	HD ✓

**DESIGNATION OF FINAL STATEMENT
CANDIDATE OR SPECIFIC PURPOSE
POLITICAL COMMITTEE**
(Title 15, Texas Election Code)

Name of Candidate or Specific Purpose Political Committee
Jane Jackson

I, the undersigned candidate/specific purpose political committee's campaign treasurer, do not intend to accept contributions or to make expenditures relating to this election or series of elections. I further intend to terminate the status of the campaign treasurer. I understand that a new designation of campaign treasurer must first be filed before I/the political committee can be involved in a future election.

Check the appropriate statement:

SURPLUS^{1,2}

- I, the candidate/campaign treasurer, understand that any surplus of funds from this campaign will not be utilized for purposes involved in this election.

DEFICIT³

- I, the candidate, understand that the effect of any deficit reported in any statements required by involvement in a particular campaign will be personally assumed by me and no contributions may be collected to offset the deficit.

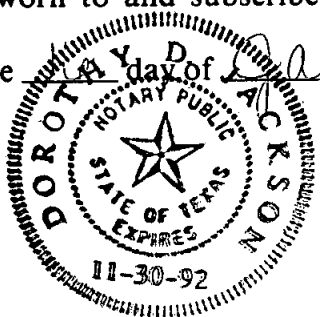
TREASURER OF CANDIDATE
IS NOT AUTHORIZED TO SIGN
FOR CANDIDATE

Jane Jackson

Signature of candidate or political committee's campaign treasurer or assistant campaign treasurer

Sworn to and subscribed before me by *Jane Jackson*

this the 15 day of January, 19 91, to certify which, witness my hand and seal.



Dorothy P. Jackson

Signature of officer administering oath

DOROTHY P. JACKSON

Print name of officer administering oath

NOTARY PUBLIC, STATE OF TEXAS

Title of officer administering oath

SEE REVERSE SIDE FOR FOOTNOTES

ATTACH COMPLETED SWORN STATEMENT OF CONTRIBUTIONS AND EXPENDITURES
(Parts X-01, X-02, X-03, X-04 or Parts S-01, S-02, S-03, S-04, as applicable)