

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Judge	FIRST June	MI
	NICKNAME	LAST Jackson	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: P.O. Box 371	APT / SUITE #:	CITY: Hempstead, TX STATE: ZIP CODE: 77445
	OFFICE USE ONLY		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (979)	PHONE NUMBER 826-3982	EXTENSION
	Date Received		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST V.L.	MI
	NICKNAME	LAST Sunder	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 31315 FM 2920 Waller, TX 77484		
	Date Hand-delivered or Date Postmarked 10/30/06		
8 CAMPAIGN TREASURER PHONE	AREA CODE (936)	PHONE NUMBER 931-1315	EXTENSION
	Receipt #		
9 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 type="checkbox"/> July 15 <input checked="" type="checkbox"/> 6th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 10 / 8 / 06 THROUGH 11 / 30 / 06		
	Date Processed		
11 ELECTION	ELECTION DATE Month Day Year 11 / 7 / 06		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
	Date Imaged		
12 OFFICE	OFFICE HELD (if any) Waller County Auditor	13 OFFICE SOUGHT (if known) Waller Co. At at Law	
14 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

15 C/OH NAME

June Jackson

16 ACCOUNT # (Ethics Commission Filers)

17 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

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ - 0 -

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 2187.22

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 4,276.79

CONTRIBUTION BALANCE

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

\$ 3.87

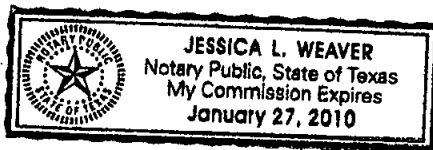
OUTSTANDING LOAN TOTALS

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

\$ 5,000.00

19 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.



June Jackson
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said June Jackson, this the 30th day of October, 2006, to certify which, witness my hand and seal of office.

Jessica L. Weaver Jessica L. Weaver NOTARY
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Jane Jackson</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/9/06</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jim James</i>	7 Amount of contribution (\$) <i>\$400.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>Box 1146, Bryan, TX 77806</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation <i>Attorney</i>	10 Contributor's job title
11 Contributor's employer/law firm <i>James, Reynolds</i>	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date <i>10/9/06</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Todd Overstreet</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6154 Buysome Rd Houston, TX</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date <i>10/9/06</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robertson Deal</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>118 S. Main Bryan, TX 77803</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Juane Jackson</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/16/06</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>TRICHTER - Murphy PC</i>	7 Amount of contribution (\$) <i>\$500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City, State, Zip Code <i>200 Smith St Houston, TX 77002</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation	10 Contributor's job title
11 Contributor's employer/law firm	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date <i>10/16/06</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Wayne Keller</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code <i>1303 Prairie Suite 106 Houston, TX 77002</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation	Contributor's job title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

Date <i>10/18/06</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alan Folger</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code <i>18011 Bluka Rd Waller, TX 77484</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation	Contributor's job title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Jane Jackson</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/23/06</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Emogene Kennedy</i>	7 Amount of contribution (\$) <i>\$50.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 393 Kempster, TX 77445</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation <i>Housewife / homemaker</i>	10 Contributor's job title
11 Contributor's employer/law firm	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date <i>10/23/06</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Carol Cheney</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>P.O. Box 906 Kempster, TX 77445</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Attorney</i>	Contributor's job title		
Contributor's employer/law firm	Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)			

Date <i>10/23/06</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Patricia Brown-Deaver</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Box 875 Prairie View, TX 77446</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Retired teacher/gym owner</i>	Contributor's job title		
Contributor's employer/law firm	Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Juve Jackson</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/23/06</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Wm Zplew</i>	7 Amount of contribution (\$) <i>\$200.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>37184 Brunlae Rd Hempstead Tx 77445</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation <i>Commissioner</i>	10 Contributor's job title
11 Contributor's employer/law firm	12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date <i>10/23/06</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Carol Ercsey</i>	Amount of contribution (\$) <i>\$187.22</i>	In-kind contribution description (if applicable) <i>Get out the vote coffee 2 zero copies</i>
Contributor address; City; State; Zip Code <i>P.O. Box 916 Hempstead, Tx 77445</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation <i>Attorney</i>	Contributor's job title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation	Contributor's job title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Jane Jackson</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/23/06</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Trey Debow</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>Box 640 Waller, TX 77484</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>Attorney</i>		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS (JUDICIAL)

Previously Reported - Outstudy

SCHEDULE E (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J):
2 FILER NAME <i>Jane Jackson</i>		3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨		\$
5 Date of loan <i>12/14/05</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jane Jackson</i>	9 Loan Amount (\$) <i>\$5,000.00</i>
6 Is lender a financial institution? <input checked="" type="radio"/> Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code <i>P.O. Box 571 Hempstead, TX 77445</i>	10 Interest rate
12 Lender's Principal Occupation		11 Maturity date
13 Lender's Job Title		
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input type="checkbox"/> none		
18 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	19 Name of guarantor 20 Guarantor address; City; State; Zip Code	21 Amount Guaranteed (\$)
22 Guarantor's Principal Occupation		23 Guarantor's Job Title
24 Guarantor's Employer/Law Firm		25 Law Firm of guarantor's spouse (if any)
26 If guarantor is child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Jane Jackson</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>10/13/06</i>	5 Payee name <i>Total Team Concept</i>	7 Amount (\$) <i>\$265.63</i>
6 Payee address; City; State; Zip Code <i>13238 AM 1887 Hempstead, TX 77445</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>T-Shirts</i> <small>(If travel outside of Texas, complete Schedule T)</small>		9 <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>10/14/06</i>	Payee name <i>HomeTown Hardware</i>	Amount (\$) <i>\$109.86</i>
Payee address; City; State; Zip Code <i>Box 479 Waller, TX 77484</i>		
Purpose of payment (See instructions regarding type of information required.) <i>T Posts for Signs</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>10/16/06</i>	Payee name <i>Goy Co</i>	Amount (\$) <i>\$1,565.47</i>
Payee address; City; State; Zip Code <i>27644 Hay 6 Hempstead, TX 77445</i>		
Purpose of payment (See instructions regarding type of information required.) <i>Printing</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held
Date <i>10/17/06</i>	Payee name <i>U.S. Postmaster</i>	Amount (\$) <i>\$2,335.83</i>
Payee address; City; State; Zip Code		
Purpose of payment (See instructions regarding type of information required.) <i>Postage for Flyers</i> <small>(If travel outside of Texas, complete Schedule T)</small>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

OUTSTANDING LOANS

SCHEDULE L

See loan Reported Schedule Z

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L:	
2 FILER NAME <i>Jane Jackson</i>		3 ACCOUNT # (Ethics Commission filers)	
LENDER INFORMATION	4 Name of lender <i>Jane Jackson</i>		
	5 Lender address; City; State; Zip Code <i>P.O. Box 571 Haysland, TX</i>		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	6 Name of guarantor		
	7 Guarantor address; City; State; Zip Code		
LENDER INFORMATION	Name of lender		
	Lender address; City; State; Zip Code		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor		
	Guarantor address; City; State; Zip Code		
LENDER INFORMATION	Name of lender		
	Lender address; City; State; Zip Code		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor		
	Guarantor address; City; State; Zip Code		
LENDER INFORMATION	Name of lender		
	Lender address; City; State; Zip Code		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor		
	Guarantor address; City; State; Zip Code		

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