

**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: <div style="text-align: center; font-size: 24pt; font-weight: bold;">10</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: _____ FIRST: <u>RANDALL</u> MI: <u>J.</u> NICKNAME: _____ LAST: <u>Pick</u> SUFFIX: _____	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received: <u>FEB 22 2010</u> By: <u>9:35 AM (CH)</u> </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: _____ APT / SUITE #: _____ CITY: _____ STATE: _____ ZIP CODE: _____ <u>108 BRAZOS DR.</u> <u>HUTTO, TX 78634</u>	Date Hand-delivered or Data Postmarked: _____	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: <u>(512)</u> PHONE NUMBER: <u>642-3799</u> EXTENSION: _____	Receipt #	Amount
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: _____ FIRST: <u>Debbie</u> MI: <u>A.</u> NICKNAME: _____ LAST: <u>Pick</u> SUFFIX: _____	Date Processed: _____ Date Imaged: _____	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): _____ APT / SUITE #: _____ CITY: _____ STATE: _____ ZIP CODE: _____ <u>108 BRAZOS DR.</u> <u>HUTTO, TX 78634</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE: <u>(512)</u> PHONE NUMBER: <u>642-3799</u> EXTENSION: _____		
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 COH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <u>1/22/2010</u> <u>2/20/2010</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>3/02/2010</u>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <u>Williamson County Court At Law #3</u>	
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: _____		

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**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

15 C/OH NAME RANDALL J. PICK **16 ACCOUNT # (Ethics Commission Filer)**

17 NOTICE FROM POLITICAL COMMITTEE(S)

This box is for notice of political contributions accepted or political expenditures made 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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 475.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,775.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 21,364.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,640.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 24,388.30

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.

Randall J. Pick
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Randall J. Pick, this the 22nd day of February, 2010, to certify which, witness my hand and seal of office.

Valerie J. Raffray
Signature of officer administering oath

Valerie J Raffray
Print name of officer administering oath

Notary Public
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): 5	
2 FILER NAME RANDALL J. Pick		3 ACCOUNT # (Ethics Commission filers)	
4 Date 1/25/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joshua Schroeder	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 30013 Edgewood Dr. Georgetown, TX 78628		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		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 1/27/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rick J. Kennon	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4807 Spicewood Springs Ste 2240 Austin, TX 78759		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		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 1/28/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) OR + SE EVANS	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 112 Guadalupe Hutto, TX 78634		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Retired		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)			
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

**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 RANDALL J. PICK		3 ACCOUNT # (Ethics Commission files)	
4 Date 1/28/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jimmy Patin	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 641 West Front Street Hutto, TX 78634		(if travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation CONSTRUCTION OWNER		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 2/3/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Betty & William Smith	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2750 CR 481 Thrall, TX 76578		(if travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Retired		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 2/5/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leland M. Stevens	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 104 W. 4th Street Taylor, TX 76574		(if travel outside of Texas, complete Schedule T)	
Contributor's principal occupation CPA		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)			
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**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 RANDALL J. PICK		3 ACCOUNT # (Ethics Commission files)	
4 Date 2/8/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melanie Baker	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City, State, Zip Code 102 Cherry Wood Ct. Georgetown, TX 78628		(if travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Administrative Asst.		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 2/11/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gayle Collins	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code 1114 Speegle Taylor, TX 76574		(if travel outside of Texas, complete Schedule T)	
Contributor's principal occupation FINANCIAL Services		Contributor's job title	
Contributor's employer/law firm Edward Jones		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 2/12/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Franklin Scott Spears, Jr.	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code 901 S. Mopac, Ste 420 Austin, TX 78616		(if travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		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)			
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**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 RANDALL J. Pick		3 ACCOUNT # (Ethics Commission files)	
4 Date 2/12/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tina & Glenda Stence	7 Amount of contribution (\$) 300.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1001 W. 2nd Street Taylor, TX 76574		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Electrical Contractor		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 2/15/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heselmeyer Zinda PLLC	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 108 E. Bagdad, Ste. 300 Round Rock, TX 78664		(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 2/16/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) M/M. Ken McCarchie	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1501 Grace Street Taylor, TX 76574		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Retired		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)			
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**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>RANDALL J. Pick</i>		3 ACCOUNT # (Ethics Commission files)	
4 Date <i>2/16/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Johnette DeLeon</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1301 TH JOHNSON Dr. Taylor, TX 76574</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>Pharmacist</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>2/16/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Katherine Fowler</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2960 CR 245 Florence, TX 76527</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
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS (JUDICIAL)

SCHEDULE E (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): <p style="text-align: center;">1</p>
2 FILER NAME <p style="font-size: 1.2em;">RANDALL J. PICK</p>		3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$ 0
5 Date of loan <p style="font-size: 1.2em;">1/22/10</p>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: <p style="font-size: 1.2em;">City NATIONAL BANK</p>	9 Loan Amount (\$) <p style="font-size: 1.2em;">25,000.00</p>
6 Is lender a financial institution? <p style="font-size: 1.2em;">(Y) N</p>	8 Lender address; City; State; Zip Code <p style="font-size: 1.2em;">116 West Third Street Taylor, TX 76574</p>	10 Interest rate <p style="font-size: 1.2em;">8.544%</p>
12 Lender's Principal Occupation <p style="font-size: 1.2em;">BANKER</p>		11 Maturity date <p style="font-size: 1.2em;">1/20/2013</p>
14 Lender's Employer/Law Firm		13 Lender's Job Title
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 checked="" type="checkbox"/> none		
18 GUARANTOR INFORMATION <input checked="" 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: <i>1</i>
2 FILER NAME <i>RANDALL J. PICK</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>1/22/10</i>	5 Payee name <i>KC Strategies</i> 6 Payee address; City; State; Zip Code <i>614 S. 1st Street, Ste 261 Austin, TX 78704</i>	7 Amount (\$) <i>6,775.00</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Mail Piece</i> (If travel outside of Texas, complete Schedule T)		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>2/9/10</i>	Payee name <i>KC Strategies</i> Payee address; City; State; Zip Code <i>614 S. 1st Street, Ste 261 Austin, TX 78704</i>	Amount (\$) <i>2,000.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>Feb 10 Consulting Fee</i> (If travel outside of Texas, complete Schedule T)		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>2/9/10</i>	Payee name <i>KC Strategies</i> Payee address; City; State; Zip Code <i>614 S. 1st Street, Ste. 261 Austin, TX 78704</i>	Amount (\$) <i>11,800.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>Mail Piece</i> (If travel outside of Texas, complete Schedule T)		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>2/12/10</i>	Payee name <i>City National Bank</i> Payee address; City; State; Zip Code <i>116 West Third Street Taylor, TX 76574</i>	Amount (\$) <i>789.70</i>
Purpose of payment (See instructions regarding type of information required.) <i>Loan Payment</i> (If travel outside of Texas, complete Schedule T)		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L: <u>1</u>
2 FILER NAME <u>RANDALL J. PICK</u>		3 ACCOUNT # (Ethics Commission filers)
LENDER INFORMATION	4 Name of lender <u>City National Bank</u> <hr/> 5 Lender address; City; State; Zip Code <u>116 West Third Street</u> <u>Taylor, TX 76574</u>	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	6 Name of guarantor <hr/> 7 Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender <hr/> Lender address; City; State; Zip Code	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender <hr/> Lender address; City; State; Zip Code	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender <hr/> Lender address; City; State; Zip Code	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender <hr/> Lender address; City; State; Zip Code	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor <hr/> Guarantor address; City; State; Zip Code	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED