JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5545

FORM JC/OH
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission Users) 00041923

2 Total pages filed:

OFFICE USE ONLY
Date Received
Date Hand-Delivered or Date Postmarked
Receipt # Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
TITLE: Judge FIRST: Michael MI: F
NICKNAME: Mike LAST: Lynch SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS
☐ Change of Address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 1748
Austin, Tx 78767

5 CAMPAIGN TREASURER NAME
TITLE: Thomas FIRST: MI: D.
NICKNAME: Tom LAST: Fritz SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
98 San Jacinto Blvd. Suite 2000
Austin, Tx 78701

7 CAMPAIGN TREASURER PHONE
AREA CODE: (512) PHONE NUMBER: 476-2020 EXTENSION:

8 REPORT TYPE
☑ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED
Month Day Year: 7 / 1 / 03 THROUGH Month Day Year: 12 / 31 / 03

10 ELECTION
ELECTION DATE Month Day Year: / /
ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE
OFFICE HELD (if any): 167th District Court

12 OFFICE SOUGHT (if known): 167th District Court

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
** 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
☐ additional pages

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

14 C/OH NAME: Michael F. Lynch / Friends of Mike Lynch

15 ACCOUNT # (Ethics Commission Use): 00041923

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
- [ ] GENERAL
- [x] SPECIFIC

COMMITTEE NAME: Friends of Mike Lynch

COMMITTEE ADDRESS: 98 San Jacinto Blvd. Suite 2000 Austin, TX 78701

COMMITTEE CAMPAIGN TREASURER NAME: Thomas D. Fritz

COMMITTEE CAMPAIGN TREASURER ADDRESS: Same as above

[ ] additional pages

17 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 13,075
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4.	TOTAL POLITICAL EXPENDITURES	$ 3595 25
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 19,958 97
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

18 AFFIDAVIT

All Expenditures + contributions made through Friends of Mike Lynch Committee. See attached pages + report of that committee which is on file

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.

Mike Lynch
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP/SEAL ABOVE
MELISSA ANN MORENO
Notary Public, State of Texas
My Commission Expires
NOVEMBER 1, 2007

Sworn to and subscribed before me, by the said Mike Lynch, this the 14th day of January, 2004, to certify which, witness my hand and seal of office.

Melissa Ann Moreno — Melissa Ann Moreno
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: Michael F Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/9/03	Rey Minton, Charles Burton, John Foster, Rip Collins	1100 Guadalupe Austin, Tx 78701	$1,000.00	

Sam Bassett et al

9 Contributor's principal occupation: Attorneys

10 Contributor's job title: Attorneys

11 Contributor's employer/law firm: Minton, Burton, Foster, Collins

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 ☐ out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/15/03	Ben Florey, Terry Keel, Jason Nasseur	704 W. 9th Street Austin, Tx 78701	$250.00	

Contributor's principal occupation: Attorneys

Contributor's job title: Attorneys

Contributor's employer/law firm: Florey, Keel, Nasseur

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 ☐ out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/17/03	Tom Weber	6214 Briarwood Austin, Tx 78757	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/18/03	Paul Dunham P.O. Box 684666 Austin, Tx 78766	$250.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Dunham Law Farm

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Mark Westenhover 404 N 13th St. Austin, Tx 78701-1825	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Thomas Prichard 1300 Guadalupe St, Ste. 210 Austin, Tx 78701-1643	$50.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self.

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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 0CC41923.

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/18/03	Joe Taylor P.O. Box 1521 Austin, TX 78767	$250.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#: ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Wade Russell 404 W. 13th St. Austin, TX 78701	$150.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#: ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Robb Shepherd P.O. Box 2526 Austin, TX 78768	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self.

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)

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2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/18/03	Elsie Craven 1302 W. Ave Austin, TX 78701	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	David Sheppard 700 Lavaca #1550 Austin, TX 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

Law firm of contributor's spouse (if any): Travis County Judge

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Mike Luna 2301 E. Cesar Chavez. Austin, TX 78702	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self.

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)

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1 Total pages Schedule A(J):

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission Filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/18/03	Mark Janssen 110 E. San Antonio St. San Marcos, Tx 78666	$50.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	David Betsford 1307 West Avenue Austin, Tx 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

Law firm of contributor's spouse (if any): Attorney

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Mark McCrimmon 900 Rio Grande Austin, Tx 78701	$75.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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)

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1 Total pages Schedule A(J)

2 FILER NAME: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/18/03	Robert Harris 2402 Bluffview Austin, Tx 78704	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Steve Turre 404 W. 13th Street Austin, Tx 78701	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Dan Whitecraft 807 W. 10th St. Austin, Tx 78701	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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2 FILER NAME: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/18/03	Malcolm Greenstein 1606 E. Cesar Chavez Austin, Tx 78702	$150.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Greenstein & Kolker

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Charles Popper 6409 Gouldville Ct. Austin, Tx 78739	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Lowell Clayton P.O. Box 5336 Austin, Tx 78763	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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)

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2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/18/03	Bill Fitzgerald & Wayne Meissner 612 San Antonio, Ste 400 Austin, Tx 78701	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Fitzgerald & Meissner

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Allan Williams, Andy Forsythe, Steve Brittain. 1100 West Avenue Austin, Tx 78701	$500.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Williams, Forsythe, Brittain

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/18/03	Phillip Presser 819 1/2 W. 11th St. Austin, Tx 78701	$200.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self.

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)

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1 Total pages Schedule A(J)

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/19/03	Frank Bryan 106 E. 6th St., Ste. 900 Austin, TX 78701	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Chris Morgan 8816 Tallwood Dr. #263 Austin, TX 78759	$50.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Aaron Mueller 6005 W. 10th St. Austin, TX 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Granger & Mueller

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)

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1 Total pages Schedule A(J):

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): C0041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/19/03	Chris Gunter 600 W. 9th St. Austin, Tx 78701	$250.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Joe Turner 11217 Fitzhugh Road Austin, Tx 78736	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Ariel Payan 611 W. 15th St. Austin, Tx 78701	$500.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

Law firm of contributor's spouse (if any): Travis County Assistant D.A.

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)

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2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/19/03	Gus Garcia 1600 W. 13th St. Austin, TX 78701	$150.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Steve Orr & Victor Olavson 604 Rio Grande Austin, TX 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Orr & Olavson

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	John Butler 816 Congress Ave., Ste. 1100 Austin, TX 78701	$50.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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)

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1 Total pages Schedule A(J)

2 FILER NAME: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/19/03	William P. Allison 700 Windsong Trail Austin, Tx 78746	$250.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 (☐ out-of-state PAC (ID#____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Bill Whitehurst : Tom Harkness PO Box 1602 Austin, Tx 78767	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Whitehurst : Harkness

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 (☐ out-of-state PAC (ID#____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Scott Smith 1304 Nueces Austin, Tx 78701	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self.

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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/19/03	Kent Anschutz 1012 Rio Grande Austin, TX 78701	$200.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	John Yeager 1012 Rio Grande Austin, TX 78701	$150.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Nick Duncan 4422 Buckskin #101 Austin, TX 78745	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/19/03	Randy Learitt 1900 Pearl St Austin, TX 78705	$250.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#: ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Robert Kennauer-Ramirez 1103 Nueces Austin, TX 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#: ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Duain Cousins 8135 IH35 Austin, TX 78744	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address: City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/19/03	Clay Strange 1106 E. 6th St. Littlefield Bldg. Center Suite 900 Austin, TX 78701	$200.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address: City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Jorge Pineda 2211 S. IH35, Ste. 107 Austin, TX 78741	$500.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Pineda & Associates

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 ☐ out-of-state PAC (ID#:) / Contributor address: City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/19/03	Ian Inglis 1012 Rio Grande Austin, TX 78701	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self.

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: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	Thad Son 104 Cold Water Lane Austin, TX 78734	$200.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

12 Law firm of contributor's spouse (if any): Attorney - Self

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

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Gail Van Winkle P.O. Box 1748 Austin, TX 78767	$50.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Travis County District Attorney

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 ☐ out-of-state PAC (ID# ____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Mike Davis 8911 Capital of Tx Hwy., Ste 2110 Austin, TX 78759	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Slack & Davis

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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923.

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	Charles Grigson 604 W. 12th St Austin, TX 78701	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Gary Cohen 1307 West Ave Austin, TX 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Turner Gassaway P.O. Box 1330 Bastrop, TX 78602	$150.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	Kristine Davis-Jones 3903 Duval St Austin, TX 78751	$250.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID# ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Kyle Lowe ECC Rio Grande Austin, TX	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID# ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Bobby Taylor 1209 East MLK Austin, TX 78702	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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)

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1 Total pages Schedule A(J):

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923.

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#.....) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	Nate Stark 1401 Possum Trot Austin, TX 78703	$200.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#.....) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	George Guerry Jr. 1108 Nueces Austin, TX 78701	$50.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#.....) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Gray Jolik 4131 Spicewood Springs Rd. Bldg C-E, Austin, TX 78759	$50.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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1 Total pages Schedule A(J)

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	Brad Houston 500 W. 16th St., Ste. 301 Austin, Tx 78701	$50.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: self

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Bart Denum P.O. Box 5995 Austin, Tx 78763	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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 (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	William White 606 W. 12th St., Ste. B Austin, Tx 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	Scott Young 600 W. 12th St Austin, TX 78701	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Larry Sauer 1004 West Ave. Austin, TX 78701	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Tracy Cluck P.O. Box 855 Dripping Springs, TX 78620	$50.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Self

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.

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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	David Shapiro 1200 San Antonio Austin, Tx 78701	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Betty Blackwell 1306 Nueces Austin, Tx 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	D K. Punzi 316 W. 12th St, Ste. 101-B Austin, Tx 78701	$100.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self.

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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/31/03	Bruce Fox 404 W. 13th St. Austin, Tx 78701	$100.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Kenneth Gibson 700 Lavaca, Suite 1010 Austin, Tx 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/03	Dexter Gilford 700 Lavaca, Suite 1550 Austin, Tx 78701	$250.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: self

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.

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: Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923.

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
1/1/04	Chris Dorbandt 505 E. Huntland, Ste. 270 Austin, TX 78752	$250.00	

9 Contributor's principal occupation: Attorney

10 Contributor's job title: Attorney

11 Contributor's employer/law firm: Chris Dorbandt & Associates

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/2/04	Bryan Case P.O. Box 1748 Austin, TX 78767	$150.00	

Contributor's principal occupation: Attorney

Contributor's job title: Attorney

Contributor's employer/law firm: Travis County District Attorney

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 ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

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.

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

NONE

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule B(J).

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____)	8 Amount of pledge ($)	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code		

10 Pledgor's principal occupation

11 Pledgor's job title

12 Pledgor's employer/law firm

13 Law firm of pledgor's spouse (if any)

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

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		

Pledgor's principal occupation

Pledgor's job title

Pledgor's employer/law firm

Law firm of pledgor's spouse (if any)

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

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		

Pledgor's principal occupation

Pledgor's job title

Pledgor's employer/law firm

Law firm of pledgor's spouse (if any)

If pledgor 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.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325 8506

LOANS (JUDICIAL)

SCHEDULE E (J)

NONE

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E(J)

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date of loan

6 Is lender a financial institution? Y N

7 Name of lender ☐ out-of-state PAC (ID#. .....)

8 Lender address; City, State; Zip Code

9 Loan Amount ($)

10 Interest rate

11 Maturity date

12 Lender's Principal Occupation

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

☐ none

18 GUARANTOR INFORMATION

☐ 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: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/4/03	Travis County Bar Association 700 Lavaca St. Austin, Tx 78701	$60.00

8 Purpose of payment (See instructions regarding type of information required.): Bar & Grill Tickets.

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/15/03	Southwestern Bell P.O. Box 3025 Houston, Tx 77097-0043	$85.45

Purpose of payment (See instructions regarding type of information required.): Office Phone Bill

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/21/03	Austin Young Lawyers Association 700 Lavaca St Austin, Tx 78701	$40.91

Purpose of payment (See instructions regarding type of information required.): Bar & Grill Ad

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/25/03	Wade Russell 404 W. 13th St. Austin, Tx 78701	$100.00

Purpose of payment (See instructions regarding type of information required.): Music - Staff Judge Dinner

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME
Michael F. Lynch / Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers)
00041923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
9/11/03	Southwestern Bell P.O. Box 3025 Houston, Tx 77097-0043	$41.18

8 Purpose of payment (See instructions regarding type of information required.)
Office Phone Bill

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/11/03	Austin AFL-CIO P.O. Box 684644 Austin, Tx 78768-4644	$105.00

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/16/03	HBAA (Hispanic Bar Assoc. of Austin)	$100.00

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/17/03	Arkies Grill 4827 E. Cesar Chavez Austin, Tx 78702	$19.00

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME
Michael F. Lynch / Friends of Mike Lynch.

3 ACCOUNT # (Ethics Commission filers)
00041923.

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/1/03	Shawn Barrington P.O. Box 1748 Austin, Tx 78767	$44.14

8 Purpose of payment (See instructions regarding type of information required.)
Probation meeting (Pizza) w South Unit officers.

9 -- Complete if direct expenditure to benefit C/OH: --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/13/03	Southwestern Bell P.O. Box 3025 Houston, Tx 77097-0043.	$41.16

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

-- Complete if direct expenditure to benefit C/OH: --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/29/03	Central Austin Democrats Austin, Tx	$250.00

Purpose of payment (See instructions regarding type of information required.)
Pat Crow Roast - Fundraiser

-- Complete if direct expenditure to benefit C/OH: --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/10/03	Southwestern Bell. P.O. Box 3025 Houston, Tx 77097-0043.	$41.16

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

-- Complete if direct expenditure to benefit C/OH: --
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/26/03	Travis County Bar Assoc 700 Lavaca St Austin, Tx 78701	$25.00

8 Purpose of payment (See instructions regarding type of information required.): Membership List - For Fundraiser

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/26/03	Ballet East P.O. Box 684134 Austin, Tx 78768-4134	$150.00

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/4/03	Travis County Democratic Party 706 W. MLK Blvd Austin, Tx 78701	$1500.00

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/8/03	Office Max 907 W. 5th St. Austin, Tx 78703	$27.00

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1. Total pages Schedule F:

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/8/03	U.S. Post Office Austin, TX	$222.00

8 Purpose of payment (See instructions regarding type of information required.): Fundraiser Postage Stamps

9 -- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/8/03	Gene Burns P.O. Box 1748 Austin, TX 78767	$15.00

Purpose of payment (See instructions regarding type of information required.): Flowers - Judge Dietz Dad Funeral

-- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/8/03	Kinkos 327 Congress Ave. Austin, TX 787	$266.94

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

-- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/8/03	Rounders 1203 W. 6th Street Austin, TX 78703	$40.00

Purpose of payment (See instructions regarding type of information required.): Staff Fundraiser Dinner [Fundraiser prep]

-- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME
Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers)
CCC41923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/11/03	Southwestern Bell P.O. Box 3025 Houston, Tx 77097-0043	$44.52

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

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/29/03	H.E.B. 6900 Brodie Lane Austin, Tx 78745	$33.61

Purpose of payment (See instructions regarding type of information required.)
Brown Santa - Contribution of Food

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/19/03	Luby's 1616 Ottarf Austin, Tx 78741	$50.00

Purpose of payment (See instructions regarding type of information required.)
Christmas - Staff gift

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/22/03	Shoreline Grill 98 San Jacinto Blvd. Austin, Tx 78701	$150.00

Purpose of payment (See instructions regarding type of information required.)
Staff Luncheon - w
clerk / staff / DAS

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Michael F. Lynch | Friends of Mike Lynch

3 ACCOUNT # (Ethics Commission filers): 0004 1923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/5/04	Travis County Democratic Party 706 W. MLK Blvd. Austin, Tx 78701	$100.00

8 Purpose of payment (See instructions regarding type of information required.): Filing Day Dinner - Judge's Table

9 -- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/9/04	Southwestern Bell P.O. Box 3025 Houston, Tx 77097-0043	$43.18

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

-- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

-- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

-- Complete if direct expenditure to benefit C/OH: -- Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

NONE

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule G:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name 6 Payee address; City; State; Zip Code 7 Purpose of expenditure	8 Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

NONE

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule H:

2 FILER NAME

3 ACCOUNT # (Ethics Commission fields)

4 Date	5 Business name 6 Business address; City; State; Zip Code	7 Amount ($)

8 Purpose of payment (See instructions regarding type of information required.)	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Business name Business address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Business name Business address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Business name Business address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325 8506

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

NONE.

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule I

2 FILER NAME

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name 6 Payee address; City; State; Zip Code 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CREDITS (optional)

SCHEDULE K

NONE

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule K.

2 FILER NAME

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payor name 6 Payor address; City; State; Zip Code 7 Reason for credit	8 Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

OUTSTANDING LOANS

SCHEDULE L

NONE

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule L

2 FILER NAME

3 ACCOUNT # (Ethics Commission Use)

LENDER INFORMATION	4 Name of lender 5 Lender address; City; State; Zip Code
GUARANTOR INFORMATION ☐ 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 ☐ not applicable	Name of guarantor Guarantor address; City; State; Zip Code
LENDER INFORMATION	Name of lender Lender address; City; State; Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor Guarantor address; City; State; Zip Code
LENDER INFORMATION	Name of lender Lender address; City; State; Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor Guarantor address; City; State; Zip Code

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

ASSETS VALUED AT $500 OR MORE

SCHEDULE M

NONE.

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule M

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

NONE

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME

2 ACCOUNT # (Ethics Commission Use)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are a candidate ••

A. CAMPAIGN FUNDS

Check only one:

☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file.

Signature of Officeholder

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

OFFICE USE ONLY
Date Received
Date Hand-delivered or Date Postmarked
Date Processed
Date Imaged

AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Filer name		Account #
Michael F. Lynch	Friends of Mike Lynch.	00041923

1. I swear or affirm that I have not accepted more than $20,000 in political contributions or made more than $20,000 in political expenditures in a calendar year.

2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.

3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.

4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds $20,000 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.

5. I am filing this affidavit with the January 15 Semi Annual report due on Jan. 15, 2004. I understand that this affidavit is required to be filed with *each* campaign finance report for which I am claiming an exemption from electronic filing.

MELISSA ANN MORENO
Notary Public, State of Texas
My Commission Expires
NOVEMBER 14, 2007

Signature of Candidate or Officeholder

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Mike F. Lynch this the 14th day of January, 2004, 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
Melissa Ann Moreno	Melissa Ann Moreno	Judicial Aide

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER.