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

JUDICIAL SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

6533

FORM JSPAC COVER SHEET PG 1

The JSPAC Instruction Guide explains how to complete this form.

1 ACCOUNT# (Ethics Commission filers): 00041923

2 Total pages filed: 4

3 COMMITTEE NAME: FRIENDS OF MIKE LYNCH

OFFICE USE ONLY

Date Received: 2007 JUL 12 PM 12:38 COUNTY CLERK TRAVIS COUNTY TEXAS

Date Hand-delivered or Date Postmarked:

Receipt #: Amount:

Date Processed:

Date Imaged:

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 98 San Jacinto Blvd. Suite 2000
APT / SUITE #:
CITY: Austin
STATE: TX
ZIP CODE: 78701

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: MR.
FIRST: THOMAS
MI: D
NICKNAME:
LAST: FRITZ
SUFFIX:

6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): Same
APT / SUITE #:
CITY:
STATE:
ZIP CODE:

7 CAMPAIGN TREASURER'S MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX: Same
APT / SUITE #:
CITY:
STATE:
ZIP CODE:

8 CAMPAIGN TREASURER PHONE

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

9 REPORT TYPE

☐ January 15
☒ July 15
☐ 30th day before election
☐ 8th day before election
☐ Runoff
☐ Exceeded $500 limit
☐ Dissolution (attach JSPAC-DR)
☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 01/01/07 THROUGH Month Day Year: 06/30/07

11 ELECTION

ELECTION DATE Month Day Year: / /

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

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JUDICIAL SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM JSPAC
COVER SHEET PG 2

12 COMMITTEE NAME: FRIENDS OF MIKE LYNCH

ACCOUNT # (Ethics Commission filers)

13 COMMITTEE PURPOSE

(Attach lists on plain paper to complete this report if necessary.)

- [X] SUPPORT
- [ ] OPPOSE
- [ ] ASSIST (officeholders only)

- [ ] CANDIDATE
- [X] OFFICEHOLDER

~~CANDIDATE~~ / OFFICEHOLDER NAME: MICHAEL F. LYNCH

~~OFFICE SOUGHT (candidate)~~ / OFFICE HELD (officeholder): 167th JUDICIAL DISTRICT COURT TRAVIS COUNTY, TEXAS

14 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ -0-
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ -0-
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ -0-
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 745.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 7,118.14
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

15 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.

Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Thomas D. Fritz, this the 11th day of July, 20 07, to certify which, witness my hand and seal of office.

SUSAN K. LARSON
Notary Public, State of Texas
My Commission Expires
MARCH 15, 2010

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

Texas Ethics Commission

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2

2 FILER NAME: FRIENDS OF MIKE LYNCH

3 ACCOUNT (Ethics Commission filers): 00041923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	Amount ($)
3/14/07	Travis County Democratic Party 1318 E. 6th Austin, TX 78702	250.00

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

(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	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/22/07	Bistrollis 11th + San Antonio Austin, TX 78701	35.00

Purpose of payment (See instructions regarding type of information required.): Staff Lunch - TBC - Trial Thru Lunch.

(If travel outside of Texas, complete Schedule T)

•• 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 ($)
3/30/07	Judge John Dietz PO Box 1748 Austin, TX 78767	20.00

Purpose of payment (See instructions regarding type of information required.): J. Trianna Flowers - Reimb.

(If travel outside of Texas, complete Schedule T)

•• 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 ($)
4/10/07	D K Punzi PO Box 1748 Austin, TX 78767	100.00

Purpose of payment (See instructions regarding type of information required.): Donation - Liz Piper Fund

(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

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POLITICAL EXPENDITURES SCHEDULE

Political Expenditures Continued - Schedule F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 2

2 FILER NAME: FRIENDS OF MIKE LYNCH

3 ACCOUNT # (Ethics Commission filers): 00041923

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (If travel outside of Texas, complete Schedule T)	8 Amount ($)	Reimbursement from political contributions intended
4/23/07	Ronald McDonald House Fundraiser / KASE 101 403 E 15th Austin, TX 78701	Contribution / Ticket	150.00	☐
5/8/07	Hispanic Criminal Defense Bar 1802 W 6th Austin, TX 78703	Scholarship Fund - Fundraiser / contribution	75.00	☐
5/10/07	K.U.T. Radio University of Texas Austin, TX	Contribution	100.00	☐
1/1-6/30 07	Wells Fargo Bank PO Box 2019 Austin, TX 78768	Bank Fees	15.00	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (If travel outside of Texas, complete Schedule T)	Amount ($)	☐ Reimbursement from political contributions intended

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