JUDICIAL SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

6553

FORM JSPAC COVER SHEET PG 1

The JSPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers): 00041401

2 PAGE #: 1 of 14

3 COMMITTEE NAME: The Friends of Darlene Byrne 2000

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

2007 JUL 16 PM 12:45 TRAVIS COUNTY TEXAS

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

98 San Jacinto
Suite 2000
Austin, TX 78701

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: Attorney FIRST: Stephen MI:

NICKNAME LAST: Adler SUFFIX

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

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

808 Nueces
Austin, TX 78701

7 CAMPAIGN TREASURER'S MAILING ADDRESS

☐ Change of Address

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

808 Nueces
Austin, TX 78701

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 478-4995

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: 01/01/2007 THROUGH Month Day Year: 06/30/2007

11 ELECTION

ELECTION DATE Month Day Year: 11/08/2007

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

GO TO PAGE 2

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

JUDICIAL SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE & TOTALS

FORM JSPAC
COVER SHEET PG 2

12 COMMITTEE NAME The Friends of Darlene Byrne 2000

ACCOUNT # (Ethics Commission filers) 00041401

13 COMMITTEE PURPOSE (Attach list on plain paper to complete this report if necessary.)

☐ SUPPORT

☐ OPPOSE

☒ ASSIST (officeholders only)

☐ CANDIDATE

☒ OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME: Darlene Byrne

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder): 126th District Judge

14 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 542.54
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 4,964.13
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 59,782.21
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

15 AFFIDAVIT

SUSAN P. WOODROW
MY COMMISSION EXPIRES
July 27, 2009

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 Stephen I. Adler, this the 16 day of July, 2007, 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
Susan P. Woodrow	Susan P. Woodrow	Notary Public

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/11 Report: 3/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/19/2007	Amazon 1200 12th Avenue Suite 1200 Seattle, WA 98144	$104.83

8 Purpose of payment (See instructions regarding type of information required.)
Research material for seminar

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/25/2007	Bess' Bistro 500 West 6th Street Austin, TX 78701	$32.57

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/16/2007	Bess' Bistro 500 West 6th Street Austin, TX 78701	$21.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/21/2007	Breed & Co. 3663 Bee Caves Road Austin, TX 78746	$204.58

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/11 Report: 4/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/02/2007	Camino Real Hotel 101 South El Paso St. El Paso, TX 79904	$245.08

8 Purpose of payment (See instructions regarding type of information required.)
Lodging for seminar

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/14/2007	Crowne Plaza Hotel 740 15th Street NW Washington DC, TX 20005	$52.51

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/17/2007	Crowne Plaza Hotel 740 15th Street NW Washington DC, TX 20005	$676.27

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/07/2007	Durbin & Bennett 100 Congress Avenue Suite 1600 Austin, TX 78701	$685.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/11 Report: 5/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/04/2007	Enoteca Vespaio 1610 S. Congress Avenue Austin, TX 78704	$89.32

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

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/01/2007	Mesa Bar & Grill 2525 N. Mesa El Paso, TX 79902	$99.57

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/02/2007	My M&Ms 700 High St Hackettstown, NJ 07840	$245.45

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/30/2007	National Council for Juvenile and Family Court Judges P.O. Box 8970 Reno, NV 89507	$65.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/11 Report: 6/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/29/2007	National Council for Juvenile and Family Court Judges P.O. Box 8970 Reno, NV 89507	$242.13

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

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/02/2007	Newspaper in Education PO Box 670 Austin, TX 78767	$125.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/07/2007	Opal Divine's 700 West 6th Street Austin, TX 78701	$106.05

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/13/2007	Ozarka P.O. Box 52214 Phoenix, AZ 85072	$47.04

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/11 Report: 7/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers) 00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/30/2007	Ozarka P.O. Box 52214 Phoenix, AZ 85072	$90.81

8 Purpose of payment (See instructions regarding type of information required.)
Jury room supplies
(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/28/2007	Ozarka P.O. Box 52214 Phoenix, AZ 85072	$69.93

Purpose of payment (See instructions regarding type of information required.)
Jury room supplies
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/20/2007	Ozarka P.O. Box 52214 Phoenix, AZ 85072	$63.04

Purpose of payment (See instructions regarding type of information required.)
Jury room supplies
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/01/2007	Ozarka P.O. Box 52214 Phoenix, AZ 85072	$85.40

Purpose of payment (See instructions regarding type of information required.)
Jury room supplies
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/11 Report: 8/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/30/2007	Ozarka P.O. Box 52214 Phoenix, AZ 85072	$78.81

8 Purpose of payment (See instructions regarding type of information required.)
Jury room supplies

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/14/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$12.86

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/14/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$12.27

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/19/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$12.48

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/11 Report: 9/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/10/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$16.98

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

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/11/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$11.64

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/12/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$15.64

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/14/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$33.98

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/11 Report: 10/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
06/14/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$14.22

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

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/15/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$8.65

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/15/2007	Randalls 3300 Bee Caves Road Austin, TX 78746	$3.75

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/07/2007	Shoal Creek Saloon 909 North Lamar Austin, TX 78703	$24.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/11 Report: 11/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers) 00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/20/2007	Shoal Creek Saloon 909 North Lamar Austin, TX 78703	$31.47

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

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/22/2007	Shoal Creek Saloon 909 North Lamar Austin, TX 78703	$19.75

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/30/2007	Shoal Creek Saloon 909 North Lamar Austin, TX 78703	$44.44

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/25/2007	Shoal Creek Saloon 909 North Lamar Austin, TX 78703	$25.37

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/11 Report: 12/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/22/2007	Southwest Airlines 2702 Love Field Dr. Dallas, TX 75235	$263.30

8 Purpose of payment (See instructions regarding type of information required.)
Seminar - El Paso, Tx

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/13/2007	TCWLA P.O. Box 684683 Austin, TX 78768	$100.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/01/2007	TCWLA P.O. Box 684683 Austin, TX 78768	$40.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/07/2007	Travis County Democratic Party 1311 E. 6th Street Austin, TX 78702	$250.00

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

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/11 Report: 13/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payee name	7 Amount ($)
01/02/2007	Zax Pints and Olates 6 Payee address; City; State; Zip Code 201 Barton Springs Road Austin, TX 78701	$51.40

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

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 14/14

2 FILER NAME The Friends of Darlene Byrne 2000

3 ACCOUNT # (Ethics Commission filers)
00041401

4 Date	5 Payor name / 6 Payor address; City; State; Zip Code	7 Reason for credit	8 Amount ($)
01/19/2007	National Center for State Courts 300 Newport Avenue Williamsburg, VA 23185-4147	Reimbursement for education seminar	$169.10
01/19/2007	Travis County PO Box 1748 Austin, TX 78767	Reimbursement for car rental and parking	$86.68
03/08/2007	Travis County PO Box 1748 Austin, TX 78767	Reimbursement for seminar travel and meals	$480.49
06/05/2007	Travis County PO Box 1748 Austin, TX 78767	Reimbursement for research materials for seminar	$104.83
06/26/2007	Travis County PO Box 1748 Austin, TX 78767	Reimbursement for registration fee	$25.00