



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

**14 C/OH NAME** Zimmerman, Donald

**15 ACCOUNT #** (Ethics Commission filers)  
00054023

**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. ..

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

**17 CONTRIBUTION TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 215.00
---	-----------

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,305.00
--	--------------

**EXPENDITURE TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 26.61
--	----------

4. TOTAL POLITICAL EXPENDITURES	\$ 3,271.61
---------------------------------	-------------

**CONTRIBUTION BALANCE**

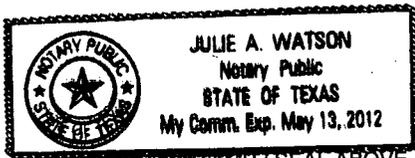
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 9,532.47
--	-------------

**OUTSTANDING LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
---	---------

**18 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.



APPX NOTARY STAMP / SEAL ABOVE

*[Signature]*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Donald Zimmerman, this the 6<sup>th</sup> day of October, 2008, 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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/5 Report: 3/11	
2 FILER NAME Zimmerman, Donald		3 ACCOUNT # (Ethics Commission filers) 00054023	
4 Date  07/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Becker, Tiffany (Ms.) ..... 6 Contributor address; City; State; Zip Code 5816 Steven Creek Way Austin, TX 78721	7 Amount of contribution (\$)  \$30.00	8 In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  07/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Becker, Tiffany (Ms.) ..... Contributor address; City; State; Zip Code 5816 Steven Creek Way Austin, TX 78721	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  08/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Becker, Tiffany (Ms.) ..... Contributor address; City; State; Zip Code 5816 Steven Creek Way Austin, TX 78721	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  09/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beuerlein, Steve ..... Contributor address; City; State; Zip Code 2605 Woodmont Ave. Austin, TX 78703	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Burlington Ventures	
Date  09/25/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burke, Edward (Mr.) ..... Contributor address; City; State; Zip Code 11311 Pickfair Dr. Austin, TX 78750	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/5 Report: 4/11	
2 FILER NAME Zimmerman, Donald		3 ACCOUNT # (Ethics Commission filers) 00054023	
4 Date  07/21/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clardy, Joanna (Ms.)  6 Contributor address; City; State; Zip Code 6723 Beauford Austin, TX 78750	7 Amount of contribution (\$)  \$300.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) Retired	
Date  08/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cox, Kathleen (Ms.)  Contributor address; City; State; Zip Code 2204 Manana Street Austin, TX 78730	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Marketing Communications		Employer (See Instructions) Self	
Date  09/14/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Foster, Erik (Mr.)  Contributor address; City; State; Zip Code 2959 Cohoba Dr Austin, TX 78757	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) At&t	
Date  07/24/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardie, Rocky (Mr.)  Contributor address; City; State; Zip Code 10300 Jollyville Rd. Apt 916 Austin, TX 78759	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Info Requested		Employer (See Instructions) Info Requested	
Date  08/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardie, Rocky (Mr.)  Contributor address; City; State; Zip Code 10300 Jollyville Rd. Apt 916 Austin, TX 78759	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Info Requested		Employer (See Instructions) Info Requested	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 5/11	
2 FILER NAME Zimmerman, Donald		3 ACCOUNT # (Ethics Commission filers) 00054023	
4 Date 07/06/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Husbands, Thomas (Mr.) ..... 6 Contributor address; City; State; Zip Code 5000 Lime Kiln Rd. Austin, TX 78666	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Ranching		10 Employer (See Instructions) Self-employed	
4 Date 07/01/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keen, Arthur ..... 6 Contributor address; City; State; Zip Code 1103 Bouldin Ave. Austin, TX 78704	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Scientist		10 Employer (See Instructions) KBSI	
4 Date 07/03/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowe, George (Mr.) ..... 6 Contributor address; City; State; Zip Code 10805 Beachmont Lane Austin, TX 78739	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Austin Heart Hospital		10 Employer (See Instructions) Physician	
4 Date 07/21/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McBride, Joe (Mr.) ..... 6 Contributor address; City; State; Zip Code 6202 Shoal Creek W Dr. Austin, TX-78757	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retail Spgt Goods		10 Employer (See Instructions) McBuder	
4 Date 07/21/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphey, Peter (Mr.) ..... 6 Contributor address; City; State; Zip Code 4000 Medical Parkway Ste 203 Austin, TX 78756	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Business Owner		10 Employer (See Instructions) Kerring Group	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/5 Report: 6/11

2 FILER NAME Zimmerman, Donald

3 ACCOUNT # (Ethics Commission filers)

00054023

4 Date

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Siekkinen, Michael

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

07/01/2008

6 Contributor address; City; State; Zip Code  
3200 1ST ST S APT 312  
Austin, TX 78704

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Software Engineer

10 Employer (See Instructions)  
Indeed.com

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Simmons, Amelia

Amount of contribution (\$)

In-kind contribution description (if applicable)

08/09/2008

Contributor address; City; State; Zip Code  
499 Rocky River Rd.  
Austin, TX 78746

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Entrepreneur

Employer (See Instructions)  
Amy's Ice Cream

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Skaggs, Jim (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

07/21/2008

Contributor address; City; State; Zip Code  
4700 Toreader Dr.  
Austin, TX 78746

\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Stepney, Alfonzie

Amount of contribution (\$)

In-kind contribution description (if applicable)

08/14/2008

Contributor address; City; State; Zip Code  
18100 Mammoth Cave Blvd  
Pflugerville, TX 78660

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Permit Specialist

Employer (See Instructions)  
TCEQ

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Sullivan, John (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

07/09/2008

Contributor address; City; State; Zip Code  
10601 Cranford Ct.  
Austin, TX 78726

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Software Engineer

Employer (See Instructions)  
BMC

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/5 Report: 7/11	
2 FILER NAME Zimmerman, Donald		3 ACCOUNT # (Ethics Commission filers) 00054023	
4 Date  07/19/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Republican Party  6 Contributor address; City; State; Zip Code 10711 Burnet Road Ste. 315 Austin, TX 78758	7 Amount of contribution (\$)  \$5,000.00	8 In-kind contribution description (if applicable) Campaign training   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  07/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis County Republican Party  Contributor address; City; State; Zip Code 10711 Burnet Road Ste. 315 Austin, TX 78758	Amount of contribution (\$)  \$6,200.00	In-kind contribution description (if applicable) Voter Database   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  08/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Troutman, William  Contributor address; City; State; Zip Code 6109 Idlewood Cv Austin, TX 78745	Amount of contribution (\$)  \$60.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Self	
Date  07/21/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walls, Clyde (Mr.)  Contributor address; City; State; Zip Code 4504 Wild Dunes Ct. Austin, TX 78747	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Walls Consulting Service	

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/2 Report: 8/11
<b>2</b> FILER NAME Zimmerman, Donald		<b>3</b> ACCOUNT # (Ethics Commission filers) 00054023
<b>4</b> Date  07/01/2008	<b>5</b> Payee name Browne, Barrett (Mr.)  ..... <b>6</b> Payee address; City; State; Zip Code 2900 S 1st Street Austin, TX 78704	<b>7</b> Amount (\$)  \$400.00
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Contract Fundraising  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/11/2008	Payee name Browne, Barrett (Mr.)  ..... Payee address; City; State; Zip Code 2900 S 1st Street Austin, TX 78704	Amount (\$)  \$400.00
Purpose of payment (See instructions regarding type of information required.) Contract Fundraising  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/28/2008	Payee name Browne, Barrett (Mr.)  ..... Payee address; City; State; Zip Code 2900 S 1st Street Austin, TX 78704	Amount (\$)  \$300.00
Purpose of payment (See instructions regarding type of information required.) Contract Fundraising  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/28/2008	Payee name Deadline Productions  ..... Payee address; City; State; Zip Code 4815 BRAKER LANE STE: 502 PMB 137 Austin, TX 78759	Amount (\$)  \$500.00
Purpose of payment (See instructions regarding type of information required.) Internet radio advertising  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** 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: 2/2 Report: 9/11

**2** FILER NAME Zimmerman, Donald **3** ACCOUNT # (Ethics Commission filers) 00054023

<b>4</b> Date 07/01/2008	<b>5</b> Payee name Hartland, Abigail (Ms.)	<b>7</b> Amount (\$) \$400.00
<b>6</b> Payee address; City; State; Zip Code 803 Patterson Ave Austin, TX 78703		

**8** Purpose of payment (See instructions regarding type of information required.)  
Contract Fundraising  
**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Office sought:  
Office held:  
(If travel outside of Texas, complete Schedule T)

Date 07/11/2008	Payee name Hartland, Abigail (Ms.)	Amount (\$) \$400.00
Payee address; City; State; Zip Code 803 Patterson Ave Austin, TX 78703		

Purpose of payment (See instructions regarding type of information required.)  
Contract Fundraising  
**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Office sought:  
Office held:  
(If travel outside of Texas, complete Schedule T)

Date 09/18/2008	Payee name Myers, John (Mr.)	Amount (\$) \$845.00
Payee address; City; State; Zip Code 4410 Franklin Park Dr. Austin, TX 78744		

Purpose of payment (See instructions regarding type of information required.)  
Sign Installation  
**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Office sought:  
Office held:  
(If travel outside of Texas, complete Schedule T)

# CREDITS (optional)

# SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/1 Report: 10/11

**2** FILER NAME Zimmerman, Donald

**3** ACCOUNT # (Ethics Commission filers)  
00054023

<b>4</b> Date	<b>5</b> Payor name CBS Radio	<b>8</b> Amount (\$)
08/14/2008	<p><b>6</b> Payor address; City; State; Zip Code 1515 Broadway, 46th Flr. New York, NY 10036</p>	\$20.00
	<p><b>7</b> Reason for credit reminburse overpay</p>	

Information entered by filer as a memo

---

Schedule    Cover Sheet    \$5,000 loan repayed 9/15/08