

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7213

FORM JC/OH  
COVER SHEET PG 1

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

1 ACCOUNT #  
(Ethics Commission filers)  
00007063

2 PAGE #  
1 of 38

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI  
Ms. Brandy  
NICKNAME LAST SUFFIX  
Mueller

OFFICE USE ONLY

Date Received

10 JAN 4

FILED FOR PREPARATION

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE:  
605 W 10th St  
Austin, TX 78701

Change of Address

DANA DEBEAUVOUR  
COUNTY CLERK  
TRAVIS COUNTY TEXAS

5 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Ms. Martha  
NICKNAME LAST SUFFIX  
Dickie

6 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE:  
2301 S Capital of Texas Hwy Bldg H  
Austin, TX 78746

(Residence or business)

7 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(512) 474-9486

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 THROUGH Month Day Year  
07/01/2009 12/31/2009

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  
03/02/2010  Primary  Runoff  General  Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)  
County Court at Law #6

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 Mueller, Brandy (Ms.)

15 ACCOUNT # (Ethics Commission filers)  
00007063

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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

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	\$	1,135.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	11,395.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	284.44
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4. TOTAL POLITICAL EXPENDITURES	\$	25,718.86
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	24,016.75
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	16,100.00
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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.

*Brandy Mueller*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brandy Mueller, this the 14 day of January, 2010, to certify which, witness my hand and seal of office.

*[Signature]*  
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 <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/21 Report: 3/38	
<b>2</b> FILER NAME Mueller, Brandy (Ms.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00007063	
<b>4</b> Date  07/25/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ausley, Robbie  <b>6</b> Contributor address; City; State; Zip Code 3707 Laurel Ledge Ln Austin, TX 78731	<b>7</b> Amount of contribution (\$)  \$250.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Contributor's principal occupation Retired		<b>10</b> Contributor's job title Retired	
<b>11</b> Contributor's employer / law firm None		<b>12</b> Law firm of contributor's spouse (if any) Ausley Algert Robertson & Flores LLP	
<b>13</b> If contributor is a child, law firm of parent(s) (if any)			
Date  07/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Avery, John Sr.  Contributor address; City; State; Zip Code 400 E Main St Round Rock, TX 78664	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Principal	
Contributor's employer / law firm Law Offices of John Avery		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date  12/10/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bennett, Kevin  Contributor address; City; State; Zip Code 1701 Jackson Hole Cv Austin, TX 78746	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Principal	
Contributor's employer / law firm Law Office of Kevin Bennett		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/21 Report: 4/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date  08/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beveridge, Bert II  6 Contributor address; City: State: Zip Code PO Box 17067 Austin, TX 78760	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Businessman		10 Contributor's job title Owner	
11 Contributor's employer / law firm Tito's Handmade Vodka		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date  10/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bizzell, Claire  Contributor address; City: State: Zip Code 5509 Shoalwood Ave Austin, TX 78756	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Retired		Contributor's job title Retired	
Contributor's employer / law firm Retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date  09/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blais, Lynn  Contributor address; City: State: Zip Code 3215 Fairfax Walk Austin, TX 78705	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Professor	
Contributor's employer / law firm University of Texas School of Law		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/21 Report: 5/38

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

07/31/2009

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

Boykin, Leslie

6 Contributor address; City: State: Zip Code

700 Lavaca St Ste 405  
Austin, TX 78701

7 Amount of contribution (\$)

\$35.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation  
Attorney

10 Contributor's job title  
Principal

11 Contributor's employer / law firm  
Law Office Of Leslie J. Boykin

12 Law firm of contributor's spouse (if any)

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

Date

10/22/2009

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

Boykin, Leslie

Contributor address; City: State: Zip Code

700 Lavaca St Ste 405  
Austin, TX 78701

Amount of contribution (\$)

\$30.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation  
Attorney

Contributor's job title  
Principal

Contributor's employer / law firm  
Law Office Of Leslie J. Boykin

Law firm of contributor's spouse (if any)

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

Date

10/30/2009

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

Brow, Geoffrey

Contributor address; City: State: Zip Code

One Dell Way MS RR1-33  
Austin, TX 78682

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation  
Attorney

Contributor's job title  
Attorney

Contributor's employer / law firm  
Dell Inc.

Law firm of contributor's spouse (if any)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/21 Report: 6/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date  07/08/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryan, Frank  6 Contributor address; City: State: Zip Code 610 Brazos St Ste 660 Austin, TX 78701	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Solo Practitioner	
11 Contributor's employer / law firm Self-Employed		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date  07/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burgess, Linda  Contributor address; City: State: Zip Code 401 Congress Ave Ste 2100 Austin, TX 78701	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Member	
Contributor's employer / law firm Winstead PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date  09/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burke, Cecelia  Contributor address; City: State: Zip Code 6500 Santolina Cv Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Director		Contributor's job title Director	
Contributor's employer / law firm Texas Association of Domestic Relations Offices		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/21 Report: 7/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date  11/03/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Roy  6 Contributor address: City: State: Zip Code 2 Niles Rd Austin, TX 78703	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Business Owner		10 Contributor's job title Owner	
11 Contributor's employer / law firm Capitol Beverage		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date  09/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byrne, Daniel  Contributor address: City: State: Zip Code 98 San Jacinto Blvd Ste 2000 Austin, TX 78701	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Partner	
Contributor's employer / law firm Fritz Byrne Head & Hamison LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date  07/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calamia Law Firm  Contributor address: City: State: Zip Code 812 San Antonio St Ste 101 Austin, TX 78701	Amount of contribution (\$)  \$250.00	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)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/21 Report: 8/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 09/17/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Callaway Cole, Jodi	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 609 W 9th St Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation Attorney		10 Contributor's job title Principal	
11 Contributor's employer / law firm The Law Firm of Jodi Callaway Cole		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 07/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cowan, Robert	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1301 W 38th St Ste 109 Austin, TX 78705		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Physician		Contributor's job title Doctor	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 08/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crockett, Moton Jr.	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code PO Box 2066 Austin, TX 78768		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Investor		Contributor's job title Investor	
Contributor's employer / law firm M.H. Crockett Properties Inc.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1 PAGE #</b> Schedule: 7/21 Report: 9/38	
<b>2 FILER NAME</b> Mueller, Brandy (Ms.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00007063	
<b>4 Date</b>  09/09/2009	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Crowley, Beryl  <b>6 Contributor address; City, State, Zip Code</b> PO Box 12487 Austin, TX 78711	<b>7 Amount of contribution (\$)</b>  \$100.00	<b>8 In-kind contribution description (if applicable)</b>          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
<b>9 Contributor's principal occupation</b> Attorney		<b>10 Contributor's job title</b> Sole Practitioner	
<b>11 Contributor's employer / law firm</b> Beryl P. Crowley, Attorney & Counselor At Law		<b>12 Law firm of contributor's spouse (if any)</b>	
<b>13 If contributor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  10/27/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Cummings, Patricia  <b>Contributor address; City, State, Zip Code</b> 405 Round Rock Ave Round Rock, TX 78664	<b>Amount of contribution (\$)</b>  \$250.00	<b>In-kind contribution description (if applicable)</b>          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
<b>Contributor's principal occupation</b> Attorney		<b>Contributor's job title</b> Sole Practitioner	
<b>Contributor's employer / law firm</b> Self-Employed		<b>Law firm of contributor's spouse (if any)</b>	
<b>If contributor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  12/18/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) De la Rosa, Ronnie  <b>Contributor address; City, State, Zip Code</b> 1106 San Antonio St Austin, TX 78701	<b>Amount of contribution (\$)</b>  \$60.00	<b>In-kind contribution description (if applicable)</b>          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
<b>Contributor's principal occupation</b> Attorney		<b>Contributor's job title</b> Principal	
<b>Contributor's employer / law firm</b> Law Office of Ron De La Rosa		<b>Law firm of contributor's spouse (if any)</b>	
<b>If contributor is a child, law firm of parent(s) (if any)</b>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1 PAGE #</b> Schedule: 8/21 Report: 10/38	
<b>2 FILER NAME</b> Mueller, Brandy (Ms.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00007063	
<b>4 Date</b>  07/07/2009	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Dow, Jason  <b>6 Contributor address; City; State; Zip Code</b> 2901 Bee Cave Rd Box C Austin, TX 78746	<b>7 Amount of contribution (\$)</b>  \$100.00	<b>8 In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Contributor's principal occupation</b> Attorney		<b>10 Contributor's job title</b> Sole Practitioner	
<b>11 Contributor's employer / law firm</b> Self-Employed		<b>12 Law firm of contributor's spouse (if any)</b>	
<b>13 If contributor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  07/30/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Dowling, Larry  <b>Contributor address; City; State; Zip Code</b> 1602 E 7th St Austin, TX 78702	<b>Amount of contribution (\$)</b>  \$250.00	<b>In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Contributor's principal occupation</b> Attorney		<b>Contributor's job title</b> Sole Practitioner	
<b>Contributor's employer / law firm</b> Self-Employed		<b>Law firm of contributor's spouse (if any)</b>	
<b>If contributor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  08/05/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Draper, Charles  <b>Contributor address; City; State; Zip Code</b> 4609 Trail Crest Cir Austin, TX 78735	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Contributor's principal occupation</b> information technology		<b>Contributor's job title</b> Owner	
<b>Contributor's employer / law firm</b> Self-Employed		<b>Law firm of contributor's spouse (if any)</b>	
<b>If contributor is a child, law firm of parent(s) (if any)</b>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/21 Report: 11/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date  12/18/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Draper, Charles  6 Contributor address; City; State; Zip Code 4609 Trail Crest Cir Austin, TX 78735	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation information technology		10 Contributor's job title Owner	
11 Contributor's employer / law firm Self-Employed		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date  07/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellwanger, Jay  Contributor address; City; State; Zip Code 11326 Alhambra Dr Austin, TX 78759	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Partner	
Contributor's employer / law firm DiNovo Price & Ellwanger LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date  07/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Falkenberg, Howard  Contributor address; City; State; Zip Code PO Box 1466 Austin, TX 78767	Amount of contribution (\$)  \$125.00	In-kind contribution description (if applicable)
Contributor's principal occupation Public Relations		Contributor's job title President	
Contributor's employer / law firm Staats Falkenberg & Partners		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/21 Report: 12/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date  12/11/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fredericks, Carol PhD  6 Contributor address: City, State, Zip Code 305 E 32nd St Austin, TX 78705	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Retired		10 Contributor's job title Retired	
11 Contributor's employer / law firm Retired		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date  07/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gardner, Doug  Contributor address: City, State, Zip Code 5905 Maury's Trl Austin, TX 78730	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Assistant United States Attorney	
Contributor's employer / law firm US Attorney's Office		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date  07/31/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grant, Charles Jr.  Contributor address: City, State, Zip Code 502 W 13th St Austin, TX 78701	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/21 Report: 13/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 07/14/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Mack Ray	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 919 Congress Ave Ste 900 Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation Attorney		10 Contributor's job title Partner	
11 Contributor's employer / law firm Hernandez Simpson LLP		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 07/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Higley, Garrett	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 901 S Mopac Expwy Ste 200 Austin, TX 78746		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm The Higley Firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 12/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hildreth, Albert	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 806 W 11th St Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Duke Hildreth Attorney at Law		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/21 Report: 14/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 12/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hunt, Russell Jr. 6 Contributor address; City; State; Zip Code 811 Nueces St Austin, TX 78701	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Sole Practitioner	
11 Contributor's employer / law firm Law Offices of Russ Hunt		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 07/21/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ihrke, Ann Contributor address; City; State; Zip Code 1441 N 1800 East Rd Buckley, IL 60918	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Retired		Contributor's job title Retired	
Contributor's employer / law firm Retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 11/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Barkley Company Contributor address; City; State; Zip Code. 3117 Guadalupe Austin, TX 78705	Amount of contribution (\$) \$300.00	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)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/21 Report: 15/38

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

07/06/2009

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

Kitz, Stephanie

6 Contributor address; City; State; Zip Code

17 Josephine St #1  
Boston, MA 02122

7 Amount of contribution (\$)

\$125.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation  
Administrative Education

10 Contributor's job title  
Director

11 Contributor's employer / law firm  
Boston Public School

12 Law firm of contributor's spouse (if any)

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

Date

11/05/2009

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

Lalk, Margaret

Contributor address; City; State; Zip Code

PO Box 92212  
Austin, TX 78709

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation  
Attorney

Contributor's job title  
Principal

Contributor's employer / law firm  
Law Office of Margaret Lalk

Law firm of contributor's spouse (if any)

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

Date

09/14/2009

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

Lewis, Gibson

Contributor address; City; State; Zip Code

2300 Race St  
Fort Worth, TX 76111

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation  
Businessman

Contributor's job title  
President

Contributor's employer / law firm  
Lewis Label Products

Law firm of contributor's spouse (if any)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1 PAGE #</b> Schedule: 14/21 Report: 16/38	
<b>2 FILER NAME</b> Mueller, Brandy (Ms.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00007063	
<b>4 Date</b>  11/05/2009	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Lowe, Claudette  <b>6 Contributor address; City; State; Zip Code</b> 400 Academy Dr Austin, TX 78704	<b>7 Amount of contribution (\$)</b>  \$200.00	<b>8 In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Contributor's principal occupation</b> Real Estate Agent		<b>10 Contributor's job title</b> Real Estate Agent	
<b>11 Contributor's employer / law firm</b> Moreland Realty		<b>12 Law firm of contributor's spouse (if any)</b> Solo Practitioner	
<b>13 If contributor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  07/30/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Lowe, Kyle Jr  <b>Contributor address; City; State; Zip Code</b> 800 Rio Grande St Austin, TX 78701	<b>Amount of contribution (\$)</b>  \$250.00	<b>In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Contributor's principal occupation</b> Attorney		<b>Contributor's job title</b> Sole Practitioner	
<b>Contributor's employer / law firm</b> Self-Employed		<b>Law firm of contributor's spouse (if any)</b>	
<b>If contributor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  12/18/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Machado, Albert  <b>Contributor address; City; State; Zip Code</b> 607 W 9th St Austin, TX 78701	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Contributor's principal occupation</b> Attorney		<b>Contributor's job title</b> Sole Practitioner	
<b>Contributor's employer / law firm</b> Law Office of Albert Machado		<b>Law firm of contributor's spouse (if any)</b>	
<b>If contributor is a child, law firm of parent(s) (if any)</b>			



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/21 Report: 17/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 11/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Madden, Margaret  6 Contributor address; City; State; Zip Code 4204 Gnarl Dr Austin, TX 78731	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Retired		10 Contributor's job title Retired	
11 Contributor's employer / law firm Retired		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 08/31/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Magnus, Simon  Contributor address; City; State; Zip Code 9442 N Capital of Texas Hwy Ste 600 Austin, TX 78759	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation Realtor		Contributor's job title Realtor	
Contributor's employer / law firm Coldwell Banker		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 10/16/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Malone, Patrick  Contributor address; City; State; Zip Code 8300 Puerta Vista Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Solo Practitioner	
Contributor's employer / law firm Law Office of Pat Malone		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 16/21 Report: 18/38

**2** FILER NAME Mueller, Brandy (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00007063

**4** Date  
  
10/27/2009

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Martinec, Joseph

**6** Contributor address; City; State; Zip Code  
223 Greystone Ln  
Cedar Creek, TX 78612

**7** Amount of contribution (\$)  
  
\$125.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

**9** Contributor's principal occupation  
Attorney

**10** Contributor's job title  
Partner

**11** Contributor's employer / law firm  
Martinec Winn Vickers & McElroy PC

**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# \_\_\_\_\_)  
McGhee, Fred PhD

10/04/2009

Contributor address; City; State; Zip Code  
6300 A Carson Rd  
Austin, TX 78741

Amount of contribution (\$)  
  
\$60.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation  
Consulting

Contributor's job title  
President

Contributor's employer / law firm  
Fred L. McGhee & 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# \_\_\_\_\_)  
Montford & McNelis LLP

07/06/2009

Contributor address; City; State; Zip Code  
505 W. 15th St  
Austin, TX 78701

Amount of contribution (\$)  
  
\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Contributor's job title

Contributor's employer / law firm

Law firm of contributor's spouse (if any)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/21 Report: 19/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 08/03/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morales, Novert	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
6 Contributor address; City: State: Zip Code 1007 E 7th St Austin, TX 78702		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation Attorney		10 Contributor's job title Partner	
11 Contributor's employer / law firm Morales & Navarrete LLP		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 09/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mueller, Joshua	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City: State: Zip Code 3911 229th Pl SE Sammamish, WA 98075		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation None		Contributor's job title None	
Contributor's employer / law firm None		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 08/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Niland, Nona MD	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City: State: Zip Code 324 Eanes School Rd Austin, TX 78746		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Community Volunteer		Contributor's job title None	
Contributor's employer / law firm None		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/21 Report: 20/38	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date  07/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peek, Jeffrey  6 Contributor address; City; State; Zip Code 1214 E 7th St Austin, TX 78702	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Partner	
11 Contributor's employer / law firm Evans & Peek		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date  08/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rapoport, Bernard  Contributor address; City; State; Zip Code PO Box 21900 Waco, TX 76702	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Retired		Contributor's job title Retired	
Contributor's employer / law firm Retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date  10/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reaud, Reagan  Contributor address; City; State; Zip Code 3411 Chestnut St Apt 335 Philadelphia, PA 19104	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed/Graduate Student		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**  
Schedule: 19/21 Report: 21/38

**2 FILER NAME** Mueller, Brandy (Ms.)

**3 ACCOUNT #** (Ethics Commission filers)  
00007063

**4 Date** 10/20/2009  
**5 Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Rentea, Bogdan

**7 Amount of contribution (\$)** \$100.00  
**8 In-kind contribution description (if applicable)**

**6 Contributor address; City; State; Zip Code**  
1002 Rio Grande  
Austin, TX 78701

(If travel outside of Texas, complete Schedule T)

**9 Contributor's principal occupation**  
Attorney

**10 Contributor's job title**  
Principal

**11 Contributor's employer / law firm**  
Rentea & Associates

**12 Law firm of contributor's spouse (if any)**

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

**Date** 08/15/2009  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Rushing, Robert

**Amount of contribution (\$)** \$100.00  
**In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
500 Spiller Ln  
Austin, TX 78746

(If travel outside of Texas, complete Schedule T)

**Contributor's principal occupation**  
Marketing

**Contributor's job title**  
Account Executive

**Contributor's employer / law firm**  
KUT Radio

**Law firm of contributor's spouse (if any)**

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

**Date** 10/05/2009  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Scanlan Buckle & Young PC

**Amount of contribution (\$)** \$250.00  
**In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
602 W 11th St  
Austin, TX 78701

(If travel outside of Texas, complete Schedule T)

**Contributor's principal occupation**

**Contributor's job title**

**Contributor's employer / law firm**

**Law firm of contributor's spouse (if any)**

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 20/21 Report: 22/38	
<b>2</b> FILER NAME Mueller, Brandy (Ms.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00007063	
<b>4</b> Date 08/14/2009	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepherd, Robb	<b>7</b> Amount of contribution (\$) \$125.00	<b>8</b> In-kind contribution description (if applicable)
<b>6</b> Contributor address; City; State; Zip Code PO Box 2526 Austin, TX 78768		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Contributor's principal occupation Attorney		<b>10</b> Contributor's job title Sole Practitioner	
<b>11</b> Contributor's employer / law firm Self-Employed		<b>12</b> Law firm of contributor's spouse (if any)	
<b>13</b> If contributor is a child, law firm of parent(s) (if any)			
Date 12/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sheppard, David	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7135 Valburn Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 07/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Slavik, Ladis Jr.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 605 W Oltorf St Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 21/21 Report: 23/38

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)  
00007063

4 Date  
07/31/2009

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Sumpter & Gonzalez

6 Contributor address; City; State; Zip Code  
209 E 9th St Ste 1511  
Austin, TX 78701

7 Amount of contribution (\$)  
\$200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

10 Contributor's job title

11 Contributor's employer / law firm

12 Law firm of contributor's spouse (if any)

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

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Valdes, Alejandro

09/10/2009

Contributor address; City; State; Zip Code  
401 Congress Ave Ste 2100  
Austin, TX 78701

Amount of contribution (\$)  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation  
Attorney

Contributor's job title  
Associate

Contributor's employer / law firm  
Winstead PC

Law firm of contributor's spouse (if any)

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

# PLEGGED CONTRIBUTIONS (JUDICIAL)

# SCHEDULE B (J)

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1 PAGE #</b> Schedule: 1/2 Report: 24/38	
<b>2 FILER NAME</b> Mueller, Brandy (Ms.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00007063	
<b>4 TOTAL OF UNITEMIZED PLEDGES:</b> ↻   ↻   ↻   ↻   ↻   ↻			<b>\$</b> 100.00
<b>5 Date</b>  07/29/2009	<b>6 Full name of pledgor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Bode, Amber Vasquez  <b>7 Pledgor address:</b> City:   State:   Zip Code 1004 West Ave Austin, TX 78701	<b>8 Amount of pledge (\$)</b>  \$250.00	<b>9 In-kind description (if applicable)</b>          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
<b>10 Pledgor's principal occupation</b> Attorney		<b>11 Pledgor's job title</b> Principal	
<b>12 Pledgor's employer / law firm</b> Vasquez Law Firm PLLC		<b>13 Law firm of pledgor's spouse (if any)</b> -	
<b>14 If pledgor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  10/07/2009	<b>Full name of pledgor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Carrillo, Jesse  <b>Pledgor address:</b> City:   State:   Zip Code 1105 Nueces St Ste 3 Austin, TX 78701	<b>Amount of pledge (\$)</b>  \$125.00	<b>In-kind description (if applicable)</b>          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
<b>Pledgor's principal occupation</b> Attorney		<b>Pledgor's job title</b> Sole Practitioner	
<b>Pledgor's employer / law firm</b> Self-Employed		<b>Law firm of pledgor's spouse (if any)</b> -	
<b>If pledgor is a child, law firm of parent(s) (if any)</b>			
<b>Date</b>  09/23/2009	<b>Full name of pledgor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Deshazo, Scott  <b>Pledgor address:</b> City:   State:   Zip Code 100 Congress Ave Ste 800 Austin, TX 78701	<b>Amount of pledge (\$)</b>  \$250.00	<b>In-kind description (if applicable)</b>          <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
<b>Pledgor's principal occupation</b> Attorney		<b>Pledgor's job title</b> Partner	
<b>Pledgor's employer / law firm</b> DeShazo & Nesbitt, LLP		<b>Law firm of pledgor's spouse (if any)</b> -	
<b>If pledgor is a child, law firm of parent(s) (if any)</b>			



# PLEGGED CONTRIBUTIONS (JUDICIAL)

# SCHEDULE B (J)

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 2/2 Report: 25/38

**2** FILER NAME **Mueller, Brandy (Ms.)**

**3** ACCOUNT # (Ethics Commission filers)  
00007063

**4** TOTAL OF UNITEMIZED PLEDGES:      ↻    ↻    ↻    ↻    ↻    ↻      \$                      100.00

<b>5</b> Date  10/07/2009	<b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Flores, Hermes	<b>8</b> Amount of pledge (\$)  \$125.00	<b>9</b> In-kind description (if applicable)
<b>7</b> Pledgor address;      City;    State;    Zip Code 812 San Antonio St Ste 118 Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

<b>10</b> Pledgor's principal occupation Attorney	<b>11</b> Pledgor's job title Principal
--	--

<b>12</b> Pledgor's employer / law firm Hermes E. Flores Law Firm PLLC	<b>13</b> Law firm of pledgor's spouse (if any)
---	---

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

Date  08/21/2009	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Taylor, Joe	Amount of pledge (\$)  \$200.00	In-kind description (if applicable)
Pledgor address;      City;    State;    Zip Code PO Box 1521 Austin, TX 78767		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

Pledgor's principal occupation Attorney	Pledgor's job title Sole Practitioner
--	--

Pledgor's employer / law firm Self-Employed	Law firm of pledgor's spouse (if any)
--	---------------------------------------

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

# POLITICAL EXPENDITURES

# SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 1/12 Report: 26/38

**2** FILER NAME Mueller, Brandy (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00007063

**4** Date  
08/30/2009

**5** Payee name  
AFL-CIO

**7** Amount (\$)  
\$215.00

**6** Payee address; City; State; Zip Code  
1106 Lavaca St  
Austin, TX 78701

**8** Purpose of payment (See instructions regarding type of information required.)  
Program Advertisement

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date

Payee name  
AFSCME Local 1624

Amount (\$)  
\$100.00

12/01/2009

Payee address; City; State; Zip Code  
7901 Cameron Rd #2-300  
Austin, TX 78754

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date

Payee name  
Becky Kittleman Photography

Amount (\$)  
\$292.28

11/21/2009

Payee address; City; State; Zip Code  
404 Inwood Road  
Austin, TX 78746

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date

Payee name  
Butts, David

Amount (\$)  
\$800.00

07/01/2009

Payee address; City; State; Zip Code  
1914 Patton Ln  
Austin, TX 78723

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**  
Schedule: 2/12 Report: 27/38

**2 FILER NAME** Mueller, Brandy (Ms.)

**3 ACCOUNT #** (Ethics Commission filers)  
00007063

**4 Date**  
  
07/29/2009

**5 Payee name**  
Butts, David

**7 Amount (\$)**  
  
\$800.00

**6 Payee address; City; State; Zip Code**  
1914 Patton Ln  
Austin, TX 78723

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

**Date**  
  
08/01/2009

**Payee name**  
Butts, David

**Amount (\$)**  
  
\$800.00

**Payee address; City; State; Zip Code**  
1914 Patton Ln  
Austin, TX 78723

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

**Date**  
  
09/30/2009

**Payee name**  
Butts, David

**Amount (\$)**  
  
\$800.00

**Payee address; City; State; Zip Code**  
1914 Patton Ln  
Austin, TX 78723

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

**Date**  
  
11/01/2009

**Payee name**  
Butts, David

**Amount (\$)**  
  
\$800.00

**Payee address; City; State; Zip Code**  
1914 Patton Ln  
Austin, TX 78723

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

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

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 3/12 Report: 28/38**2** FILER NAME Mueller, Brandy (Ms.)**3** ACCOUNT # (Ethics Commission filers)  
00007063

<b>4</b> Date	<b>5</b> Payee name	<b>7</b> Amount (\$)
12/01/2009	Butts, David	\$800.00
<b>6</b> Payee address; City; State; Zip Code 1914 Patton Ln Austin, TX 78723		

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

Consulting

(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	Amount (\$)
09/09/2009	Capital Area Democratic Women	\$100.00
Payee address; City; State; Zip Code 1501 E 6th St Austin, TX 78702		

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

Program Advertisement

(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	Amount (\$)
08/27/2009	Fedex Kinko's	\$140.63
Payee address; City; State; Zip Code 2901C Medical Arts Austin, TX 78705		

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

Copies

(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	Amount (\$)
09/28/2009	Fedex Kinko's	\$15.97
Payee address; City; State; Zip Code 2901C Medical Arts Austin, TX 78705		

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

Printing

(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: 4/12 Report: 29/38

**2** FILER NAME Mueller, Brandy (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00007063

**4** Date  
  
10/18/2009

**5** Payee name  
Fedex Kinko's

**6** Payee address; City; State; Zip Code  
2901C Medical Arts  
Austin, TX 78705

**7** Amount  
(\$)  
  
\$279.00

**8** Purpose of payment (See instructions regarding type of information required.)  
Printing Invites

(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  
  
07/29/2009

Payee name  
GNI Strategies LLC

Payee address; City; State; Zip Code  
908 E. 5th St. #114  
Austin, TX 78702

Amount  
(\$)  
  
\$750.00

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

(If travel outside of Texas, complete Schedule T)

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

Office sought:  
Office held:

Date  
  
08/30/2009

Payee name  
GNI Strategies LLC

Payee address; City; State; Zip Code  
908 E. 5th St. #114  
Austin, TX 78702

Amount  
(\$)  
  
\$750.00

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

(If travel outside of Texas, complete Schedule T)

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

Office sought:  
Office held:

Date  
  
09/30/2009

Payee name  
GNI Strategies LLC

Payee address; City; State; Zip Code  
908 E. 5th St #114  
Austin, TX 78702

Amount  
(\$)  
  
\$750.00

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

(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 <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 5/12 Report: 30/38
<b>2</b> FILER NAME Mueller, Brandy (Ms.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00007063
<b>4</b> Date  10/29/2009	<b>5</b> Payee name GNI Strategies LLC  <b>6</b> Payee address; City; State; Zip Code 908 E 5th St #114 Austin, TX 78702	<b>7</b> Amount (\$)  \$750.00
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Consulting  (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  11/25/2009	Payee name GNI Strategies LLC  Payee address; City; State; Zip Code 908 E 5th St #114 Austin, TX 78702	Amount (\$)  \$750.00
Purpose of payment (See instructions regarding type of information required.) Consulting  (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  09/24/2009	Payee name Harden, Ada  Payee address; City; State; Zip Code 1700 Meander Dr Austin, TX 78721	Amount (\$)  \$400.00
Purpose of payment (See instructions regarding type of information required.) Consulting  (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  11/16/2009	Payee name Harden, Ada  Payee address; City; State; Zip Code 1700 Meander Dr Austin, TX 78721	Amount (\$)  \$400.00
Purpose of payment (See instructions regarding type of information required.) Consulting  (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: 6/12 Report: 31/38**2** FILER NAME Mueller, Brandy (Ms.)**3** ACCOUNT # (Ethics Commission filers)  
00007063**4** Date  
12/10/2009**5** Payee name  
Harden, Ada**7** Amount  
(\$)

\$400.00

**6** Payee address; City; State; Zip Code1700 Meander Dr  
Austin, TX 78721**8** Purpose of payment (See instructions regarding type of information required.)

Consulting

**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

Payee name  
Juan in a MillionAmount  
(\$)

12/18/2009

Payee address; City; State; Zip Code

2300 E Cesar Chavez St  
Austin, TX 78702

\$139.00

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

Fundraising Event Costs

**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

Payee name  
Juan in a MillionAmount  
(\$)

12/18/2009

Payee address; City; State; Zip Code

2300 E Cesar Chavez St  
Austin, TX 78702

\$698.87

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

Fundraising Event Costs

**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

Payee name  
La Prensa NewspaperAmount  
(\$)

09/09/2009

Payee address; City; State; Zip Code

1704 E 14th St  
Austin, TX 78702

\$200.00

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

Advertisement

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T)

# POLITICAL EXPENDITURES

# SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 7/12 Report: 32/38

**2** FILER NAME Mueller, Brandy (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00007063

<b>4</b> Date 11/16/2009	<b>5</b> Payee name National Association for the Advancement of Colored People (NAACP)	<b>7</b> Amount (\$) \$130.00
<b>6</b> Payee address; City; State; Zip Code 1704 E 12th St Austin, TX 78702		

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Two Event Tickets (Reimbursed Ada Harden)  (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 12/10/2009	Payee name National Association for the Advancement of Colored People (NAACP)	Amount (\$) \$65.00
Payee address; City; State; Zip Code 1704 E 12th St Austin, TX 78702		

Purpose of payment (See instructions regarding type of information required.) One Event Ticket (Reimbursed Ada Harden)  (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 10/20/2009	Payee name Paddington Web Design	Amount (\$) \$550.00
Payee address; City; State; Zip Code 504 West 7th St, Suite B Austin, TX 78701		

Purpose of payment (See instructions regarding type of information required.) Website  (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:
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Date 12/08/2009	Payee name Paddington Web Design	Amount (\$) \$300.00
Payee address; City; State; Zip Code 504 West 7th Street Suite B Austin, TX 78701		

Purpose of payment (See instructions regarding type of information required.) Website  (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
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**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 8/12 Report: 33/38**2** FILER NAME Mueller, Brandy (Ms.)**3** ACCOUNT # (Ethics Commission filers)  
00007063**4** Date**5** Payee name  
Ranes, Jim**7** Amount  
(\$)

07/29/2009

**6** Payee address; City; State; Zip Code  
1501 Barton Springs Rd #233  
Austin, TX 78704

\$180.00

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

Invitation design, layout, ect.

(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  
Ranes, JimAmount  
(\$)

10/20/2009

Payee address; City; State; Zip Code  
1501 Barton Springs Rd #233  
Austin, TX 78704

\$124.95

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

Invitation design, layout, ect.

(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  
Ranes, JimAmount  
(\$)

12/12/2009

Payee address; City; State; Zip Code  
1501 Barton Springs Rd #233  
Austin, TX 78704

\$184.95

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

Invitation design, layout, ect.

(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  
Scholz GardenAmount  
(\$)

09/21/2009

Payee address; City; State; Zip Code  
1607 San Jacinto Blvd  
Austin, TX 78701

\$378.88

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

Deposit for Planned Event

(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: 9/12 Report: 34/38**2** FILER NAME Mueller, Brandy (Ms.)**3** ACCOUNT # (Ethics Commission filers)  
00007063**4** Date**5** Payee name

Stanley-Garrison &amp; Associates

**7**Amount  
(\$)

07/10/2009

**6** Payee address: City: State: Zip Code812 San Antonio, Suite G23  
Austin, TX 78701

\$239.73

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

Fundraising Expenses (postage, printing, phones ect.)

(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

Stanley-Garrison &amp; Associates

Amount  
(\$)

07/10/2009

Payee address: City: State: Zip Code

812 San Antonio, Suite G23  
Austin, TX 78701

\$3,926.00

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

Fundraising Consulting

(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

Stanley-Garrison &amp; Associates

Amount  
(\$)

08/09/2009

Payee address: City: State: Zip Code

812 San Antonio, Suite G23  
Austin, TX 78701

\$819.00

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

Fundraising Consulting &amp; Expenses (postage, printing, phones ect.)

(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

Stanley-Garrison &amp; Associates

Amount  
(\$)

09/09/2009

Payee address: City: State: Zip Code

812 San Antonio, Suite G23  
Austin, TX 78701

\$289.50

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

Fundraising Consulting &amp; Expenses (postage, printing, phones ect.)

(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: 10/12 Report: 35/38

**2** FILER NAME Mueller, Brandy (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00007063

<b>4</b> Date  09/09/2009	<b>5</b> Payee name Stanley-Garrison & Associates  <b>6</b> Payee address; City; State; Zip Code 812 San Antonio, Suite G23 Austin, TX 78701	<b>7</b> Amount (\$)  \$117.33
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Fundraising Consulting & Expenses (postage, printing, phones ect.)  (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  10/15/2009	Payee name Stanley-Garrison & Associates  Payee address; City; State; Zip Code 812 San Antonio Ste G23 Austin, TX 78701	Amount (\$)  \$315.03
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Purpose of payment (See instructions regarding type of information required.) Fundraising Consulting & Expenses (postage, printing, phones ect.)  (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  12/01/2009	Payee name Stanley-Garrison & Associates  Payee address; City; State; Zip Code 812 San Antonio Ste G23 Austin, TX 78701	Amount (\$)  \$407.18
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Fundraising Consulting & Expenses (postage, printing, phones ect.)  (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  12/03/2009	Payee name Travis County Democratic Party  Payee address; City; State; Zip Code 1311 E 6th St Austin, TX 78702	Amount (\$)  \$1,500.00
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Purpose of payment (See instructions regarding type of information required.) Filing Fee  (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: 11/12 Report: 36/38

**2** FILER NAME Mueller, Brandy (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00007063

<b>4</b> Date	<b>5</b> Payee name United States Post Office	<b>7</b> Amount (\$)
10/19/2009	<b>6</b> Payee address; City; State; Zip Code 4300 Speedway Austin, TX 78705	\$8.68

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Postage  (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:
---	---

<b>Date</b>	<b>Payee name</b> United States Post Office	<b>Amount (\$)</b>
10/19/2009	<b>Payee address; City; State; Zip Code</b> 4300 Speedway Austin, TX 78705	\$56.00

<b>Purpose of payment (See instructions regarding type of information required.)</b> Postage  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
---	---

<b>Date</b>	<b>Payee name</b> Worley Printing Company Inc	<b>Amount (\$)</b>
07/25/2009	<b>Payee address; City; State; Zip Code</b> 3217 N I H 35 Austin, TX 78722	\$1,007.81

<b>Purpose of payment (See instructions regarding type of information required.)</b> Printing  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
--	---

<b>Date</b>	<b>Payee name</b> Worley Printing Company Inc	<b>Amount (\$)</b>
08/25/2009	<b>Payee address; City; State; Zip Code</b> 3217 N I H 35 Austin, TX 78722	\$411.35

<b>Purpose of payment (See instructions regarding type of information required.)</b> Printing  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 12/12 Report: 37/38

**2** FILER NAME Mueller, Brandy (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00007063

**4** Date  
  
09/24/2009

**5** Payee name  
Worley Printing Company Inc  
  
**6** Payee address: City, State, Zip Code  
3217 N IH 35  
Austin, TX 78722

**7** Amount  
(\$)  
  
\$1,638.91

**8** Purpose of payment (See instructions regarding type of information required.)  
Printing  
  
(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  
  
12/10/2009

Payee name  
Worley Printing Company Inc  
  
Payee address: City, State, Zip Code  
3217 N IH 35  
Austin, TX 78722

Amount  
(\$)  
  
\$337.74

Purpose of payment (See instructions regarding type of information required.)  
Printing  
  
(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 MADE FROM PERSONAL FUNDS

## SCHEDULE G

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/1 Report: 38/38
<b>2</b> FILER NAME Mueller, Brandy (Ms.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00007063
<b>4</b> Date  10/29/2009	<b>5</b> Payee name Central Market  <b>6</b> Payee address; City; State; Zip Code 4001 N Lamar Blvd Austin, TX 78756  <b>7</b> Purpose of expenditure (See instructions regarding type of information required.) Beverages for Fundraiser  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>8</b> Amount (\$)  \$95.34  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  10/03/2009	Payee name Randalls  Payee address; City; State; Zip Code 1500 W 35th St Austin, TX 78731  Purpose of expenditure (See instructions regarding type of information required.) Balloons for Volunteer Event  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$)  \$4.29  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  10/03/2009	Payee name Taco Shack  Payee address; City; State; Zip Code 4002 N Lamar Austin, TX 78756  Purpose of expenditure (See instructions regarding type of information required.) Food for Volunteer Event  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$)  \$150.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  12/09/2009	Payee name US Postal Service  Payee address; City; State; Zip Code 3201 Bee Caves Rd Ste 120 Austin, TX 78746  Purpose of expenditure (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$)  \$266.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended