

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME Mr. Michael R. "Mike" Barre **16 ACCOUNT # (Ethics Commission Filer)**

17 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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"/> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME
	N.A.
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
COMMITTEE CAMPAIGN TREASURER ADDRESS	

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 915.00
3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
4. TOTAL POLITICAL EXPENDITURES	\$ 2798.22
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 917.62
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3100.00

EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

19 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.

Michael R. Barre

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael R. Barre, this the 15 day of July, 20 10, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Robert Courtney
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1 of 2	
2 FILER NAME Mr. Michael R. "Mike" Barre		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/26/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tracey Brockman	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 528 Roseland Parkway, Harahan, LA, 70123		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 3/18/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon Walton	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 8207 Gantcrest Dr., Austin, TX 78749		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 4/1/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edward J. Marshall	7 Amount of contribution (\$) \$40.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 1032 Cashew Lane, Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 4/1/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryan Szymczak	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 5611 Burrough Cove, Austin, TX 78745		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4 Date 4/9/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Republican Women PAC	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 5611 Burrough Cove, Austin, TX 78745		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 2 of 2	
2 FILER NAME Mr. Michael R. "Mike" Barre		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/12/10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephen Schoppe 6 Contributor address: City: State: Zip Code 14804 Brown Bluff Leander, TX 78641	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			
Date 5/17/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas Sapienza Contributor address: City: State: Zip Code 2209 Lakehurst Rd., Spicewood, TX 78669	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			
Date 5/27/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Indranil Chowdhury Contributor address: City: State: Zip Code 3918 Palace Springs, Sugar Land, TX 77479	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			
Date 6/22/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Phillips Contributor address: City: State: Zip Code 8500 Cockney Dr., Austin, TX 78748	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			
Date 6/30/10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beth M. Anderton Contributor address: City: State: Zip Code 7213 Mitra Drive, Austin, TX 78739	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T)			

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 1 of 4	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filer)
4 Date 2/21/10	5 Payee name Michael R. Barre	
6 Amount (\$) \$60.00	7 Payee address: City, State, Zip Code 6705 Hwy. 290 W., Ste. 502-188, Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description (If travel outside of Texas, complete Schedule I) Partial reimbursement of political expend. made from personal funds and previously reported on Sched. G.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/27/10	Payee name Home Depot	
Amount (\$) \$6.17	Payee address, City, State, Zip Code 1200 Home Depot Blvd., Sunset Valley, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule I) Sign deployment supplies.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/27/10	Payee name Home Depot	
Amount (\$) \$27.20	Payee address, City, State, Zip Code 1200 Home Depot Blvd., Sunset Valley, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule I) Sign deployment supplies.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/28/10	Payee name Bobby Vera	
Amount (\$) \$230.00	Payee address, City, State, Zip Code 12118 Walnut Park Crossing #1325, Austin, TX 78753	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract labor	Description (If travel outside of Texas, complete Schedule I) Contract labor for sign deployment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 2 of 4	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filers)			
4 Date 2/28/10	5 Payee name Austin Republican Women PAC				
6 Amount (\$) \$15.00	7 Payee address: City: State: Zip Code 2327 Cypress Point E, Austin, TX 78746				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Attend political seminar.			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 3/1/10	Payee name Home Depot				
Amount (\$) \$6.42	Payee address: City: State: Zip Code 1200 Home Depot Blvd., Sunset Valley, TX 78745				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Sign deployment supplies.			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 3/3/10	Payee name Oak Hill Business and Professional Association (OHBPA)				
Amount (\$) \$50.00	Payee address: City: State: Zip Code PMB 141, 6705 Hwy 290 West Austin, Texas 78735				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) OHBPA membership dues.			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 3/6/10	Payee name Austin Republican Women PAC				
Amount (\$) \$20.00	Payee address: City: State: Zip Code 2327 Cypress Point E, Austin, TX 78746				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees/Advertising Expense	Description (If travel outside of Texas, complete Schedule T) \$15 membership dues and \$5 directory advertisement			
	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 3 of 4	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3/6/10	5 Payee name Michael R. Barre	
6 Amount (\$) \$700.00	7 Payee address, City, State, Zip Code 6705 Hwy. 290 W., Ste. 502-188, Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description (If travel outside of Texas, complete Schedule T) Partial reimbursement of political expend. made from personal funds and previously reported on Sched. G.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date 3/8/10	Payee name Michael R. Barre	
Amount (\$) \$11.29	Payee address, City, State, Zip Code 6705 Hwy. 290 W., Ste. 502-188, Austin, TX 78735	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) Partial reimbursement of political expend. made from personal funds and previously reported on Sched. G.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date 4/20/10	Payee name Donna G. Davidson	
Amount (\$) \$315.00	Payee address, City, State, Zip Code PO Box 12131, Capitol Station, Austin, TX 78711	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Legal Services	Description (If travel outside of Texas, complete Schedule T) Legal fees for campaign.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date 5/21/10	Payee name Ampro Productions	
Amount (\$) \$309.60	Payee address, City, State, Zip Code 7202 Smokey Hill Rd., Austin, TX 78736	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Bumper stickers.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 4 of 4		2 FILER NAME Mr. Michael R. "Mike" Barre		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/25/10		5 Payee name We Texans			
6 Amount (\$) \$50.00		7 Payee address; City; State; Zip Code 3027 North Richmond, Wharton, TX 77488			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) Attend political banquet.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/10/10		Payee name Ampro Productions			
Amount (\$) \$36.81		Payee address; City; State; Zip Code 7202 Smokey Hill Rd., Austin, TX 78736			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Bumper stickers.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/30/10		Payee name PayPal, Inc.			
Amount (\$) \$0.59		Payee address; City; State; Zip Code 2211 North First Street, San Jose, California 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fee		Description (If travel outside of Texas, complete Schedule T) Transaction fee.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G 1 of 6	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filer)
4 Date 2/21/10	5 Payee name Home Depot	
6 Amount (\$) \$11.10 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address, City: State: Zip Code 1200 Home Depot Blvd., Sunset Valley, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising expense	(b) Description (If travel outside of Texas, complete Schedule T) Stakes for campaign signs.
Date 3/4/10	Payee name Oak Hill Business and Professional Association (OHBPA)	
Amount (\$) \$15.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State; Zip Code PMB 141, 6705 Hwy 290 West - Austin, Texas 78735	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Attend monthly OHBPA lunch meeting.
Date 3/8/10	Payee name Travis County Republican Party (TCRP)	
Amount (\$) \$75.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State: Zip Code 7901 Cameron Rd., Suite 3-202, Austin, TX 78754	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Political advertising
Date 3/9/10	Payee name Republican Club of Austin (RCA)	
Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State: Zip Code 401 W. 15th Street, Suite 850, Austin, Texas 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Attend monthly RCA lunch meeting.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G 2 of 6	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3/16/10	5 Payee name Lake Travis Republican Club (LTRC)	
6 Amount (\$) 15.00	7 Payee address; City; State; Zip Code PO Box 340327, Austin, TX 78734	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Attend monthly LTRC lunch meeting.
Date 4/6/10	Payee name Republican Club of Austin (RCA)	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 401 W. 15th Street, Suite 850, Austin, Texas 78701	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Attend monthly RCA lunch meeting.
Date 4/8/10	Payee name Austin Republican Women (ARW) PAC	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 2327 Cypress Point E, Austin, TX 78746	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Attend monthly ARW lunch meeting.
Date 4/14/10	Payee name Republican Party of Texas (RPT)	
Amount (\$) \$110.00	Payee address; City; State; Zip Code 900 Congress Ave., Suite 300, Austin, TX 78701	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fee	Description (If travel outside of Texas, complete Schedule T) Attend RPT Annual Convention and banquet.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Printing Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The instruction Guide explains how to complete this form.

1 Total pages Schedule G 3 of 6	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filer)
4 Date 4/15/10	5 Payee name Oak Hill Printing	
6 Amount (\$) \$117.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City, State; Zip Code 6112 W. Hwy. 290, Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing expense	(b) Description (If travel outside of Texas, complete Schedule H) Business cards
Date 4/20/10	Payee name Lake Travis Republican Club (LTRC)	
Amount (\$) \$15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City, State; Zip Code PO Box 340327, Austin, TX 78734	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule H) Attend monthly LTRC lunch meeting.
Date 4/24/10	Payee name Hill Country Republican Women (HCRW)	
Amount (\$) \$25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City, State; Zip Code 7202 Smoky Hill Drive, Austin, TX 78736	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule H) Attend HCRW brunch.
Date 5/2/10	Payee name Travis County Republican Party	
Amount (\$) \$170 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City, State; Zip Code 7901 Cameron Rd., Suite 3-202, Austin, TX 78754	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense/Advertising	Description (If travel outside of Texas, complete Schedule H) Attend TCRP Reagan Day Roundup banquet (\$145), with ad (\$25).

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G 4 of 6	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filer)
4 Date 5/4/10	5 Payee name Republican Club of Austin (RCA)	
6 Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code 401 W. 15th Street, Suite 850, Austin, Texas 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule I) Attend monthly RCA lunch meeting.
Date 5/12/10	Payee name Austin Republican Women (ARW) PAC	
Amount (\$) \$40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address: City: State: Zip Code 5302 S. Scout Island Cr., Austin, TX 78731	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fee	Description (If travel outside of Texas, complete Schedule I) Attend political presentation.
Date 5/18/10	Payee name Lake Travis Republican Club (LTRC)	
Amount (\$) \$15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address: City: State: Zip Code PO Box 340327, Austin, TX 78734	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule I) Attend monthly LTRC lunch meeting.
Date 5/20/10	Payee name UT EECC Garage	
Amount (\$) \$10.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address: City: State: Zip Code PO Box 7546, Austin, TX 78713	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule I) Parking to attend Texas Public Policy Foundation presentation.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G 5 of 6	2 FILER NAME <i>Mr. Michael R. "Mike" Barre</i>	3 ACCOUNT # (Ethics Commission Filer)
4 Date 6/11/10	5 Payee name Omni Hotels & Resorts	
6 Amount (\$) \$214.31 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1300 Houston St., Fort Worth, TX 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel Out Of District	(b) Description (If travel outside of Texas, complete Schedule I) Hotel stay to attend Republican Party of Texas (RPT) annual convention.
Date 6/11/10	Payee name Trinity Railway Express	
Amount (\$) \$15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1600 East Lancaster Ave., Fort Worth, TX 76102	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel Out Of District	Description (If travel outside of Texas, complete Schedule I) Train tickets to attend RPT annual convention.
Date 6/12/10	Payee name Omni Hotels & Resorts	
Amount (\$) \$5.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1300 Houston St., Fort Worth, TX 76102	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel Out Of District	Description (If travel outside of Texas, complete Schedule I) Valet parking from Hotel stay to attend RPT annual convention.
Date 6/12/10	Payee name Star Parking	
Amount (\$) \$8.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1200 Ross Ave., Dallas, TX 75202	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel Out Of District	Description (If travel outside of Texas, complete Schedule I) Parking to attend RPT annual convention

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G 6 of 6	2 FILER NAME Mr. Michael R. "Mike" Barre	3 ACCOUNT # (Ethics Commission Filers)
4 Date 6/12/10	5 Payee name Dallas Convention Center	
6 Amount (\$) \$13.75	7 Payee address; City; State; Zip Code 650 South Griffin St., Dallas, TX 75202	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Lunch at the RPT annual convention.
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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