



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME <u>McNamara, Mike (Mr.)</u>	15 ACCOUNT # (Ethics Commission filers) <u>00007207</u>
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16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ...

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

17 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)	\$ 6,824.76
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,172.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,384.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*James McNamara*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James McNamara, this the 15 day of July, 2010, to certify which, witness my hand and seal of office.

<i>James Miller</i> Signature of officer administering oath	James Miller Print name of officer administering oath	Notary Public Title of officer administering oath
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/13 Report: 4/26	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date  06/26/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bray, Terry  6 Contributor address; City; State; Zip Code 2 Green Lanes Austin, TX 78703	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self	
Date  06/08/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bsaibes, Mounir  Contributor address; City; State; Zip Code 8212 Slate Creed Trail Austin, TX 78717	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) IBM	
Date  03/08/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Casiraghi, Jane (Mrs.)  Contributor address; City; State; Zip Code 4403 Osby Houston, TX 77096	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self	
Date  04/15/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Casiraghi, Sandy K. (Mr.)  Contributor address; City; State; Zip Code 2016 Main St #1601 Houston, TX 77002-8844	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Christus Health	
Date  06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coble, Linda  Contributor address; City; State; Zip Code 10900 A Crown Colony Drive Austin, TX 78747	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/13 Report: 5/26	
2 FILER NAME    McNamara, Mike (Mr.)		3 ACCOUNT #    (Ethics Commission filers) 00007207	
4 Date  01/23/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Connor, Madeleine (Mrs.)  6 Contributor address;    City; State; Zip Code P.O. Box 161962 Austin, TX 78716-1962	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self	
Date  02/12/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cordier, John (Mr.)  Contributor address;    City; State; Zip Code 610 Cen-Tex Sportsman Rd Belton, TX 76513	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cowan, Tommy (Mr.)  Contributor address;    City; State; Zip Code 5407 Bull Run Circle Austin, TX 78727	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/06/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Bobby  Contributor address;    City; State; Zip Code 3012 Hunt Trail Austin, TX 78757	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  02/02/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daywood, John Carl (Mr.)  Contributor address;    City; State; Zip Code 600 Sabine St Ste 200 Austin, TX 78701	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 4/13 Report: 6/26

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00007207

4 Date 06/08/2010  
5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Donovan Millworks

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

6 Contributor address; City; State; Zip Code  
9108 Happy Trail  
Austin, TX 78754

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Manager

10 Employer (See Instructions)  
Pine Street Millworks

Date 06/09/2010  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
DuBose, Harold (Mr.)

Amount of contribution (\$) \$50.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
6700 Langston Drive  
Austin, TX 78723

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date 06/26/2010  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Edwards, Dick

Amount of contribution (\$) \$25.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
6528 Heron  
Austin, TX 78759

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date 06/22/2010  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Field, Scott (Mr.)

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

Contributor address; City; State; Zip Code  
9908 China Garden Cv  
Austin, TX 78730

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date 05/28/2010  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Finke, Helen

Amount of contribution (\$) \$25.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1902 Oakridge Drive  
Round Rock, TX 78681

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Realtor

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/13 Report: 7/26	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date 06/26/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fleece, Jeff ..... 6 Contributor address; City; State; Zip Code 141 Quarterhorse Ct Liberty Hill, TX 78764	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Technology Executive		10 Employer (See Instructions) State of Texas	
Date 06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flow, Terri ..... Contributor address; City; State; Zip Code 9417 Great Hills Trail #3032 Austin, TX 78759	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) BancVue	
Date 06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Foster, Lynn ..... Contributor address; City; State; Zip Code 12008 Saxony Lane Austin, TX 78727	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Mediation Liasion		Employer (See Instructions) Minacs	
Date 06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Rey (Mr.) ..... Contributor address; City; State; Zip Code 9442 N. Capital of Texas Highway Austin, TX 78759	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Ameriprise	
Date 02/11/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gerharter, Sallie (Ms.) ..... Contributor address; City; State; Zip Code 1612 Ashberry Dr Austin, TX 78723-1106	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/13 Report: 8/26	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date  06/06/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gerharter, Sallie (Ms.)  6 Contributor address; City; State; Zip Code 1612 Ashberry Dr Austin, TX 78723-1106	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) Retired	
Date  06/01/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haynes, Earnest (Mr.)  Contributor address; City; State; Zip Code 3600 Quiette Dr Austin, TX 78754	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jarvis, Steve (Mr.)  Contributor address; City; State; Zip Code 10012 Brighting Lane Austin, TX 78750	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) IBM	
Date  06/08/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Krause, Verda  Contributor address; City; State; Zip Code 3601 E K Lane Austin, TX 78754	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/04/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kunkel, Una  Contributor address; City; State; Zip Code 1708 Barbara Austin, TX 78757	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**  
Schedule: 8/13 Report: 10/26

**2 FILER NAME** McNamara, Mike (Mr.)

**3 ACCOUNT #** (Ethics Commission filers)  
00007207

**4 Date** 06/26/2010  
**5 Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Manor, Marsha (Ms.)

**7 Amount of contribution (\$)** \$50.00  
**8 In-kind contribution description (if applicable)**

**6 Contributor address; City; State; Zip Code**  
6701 Edgefield  
Austin, TX 78731

(If travel outside of Texas, complete Schedule T)

**9 Principal occupation / Job title (See Instructions)**  
Retired

**10 Employer (See Instructions)**  
Retired

**Date** 02/26/2010  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Marilyn Jackson for HD 51

**Amount of contribution (\$)** \$35.00  
**In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
1101 B Vargas Road  
Austin, TX 78741

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Campaign

**Employer (See Instructions)**  
Campaign

**Date** 06/20/2010  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
McGuinness, Patrick

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

**Contributor address; City; State; Zip Code**  
9310 Old Lampasas Trail  
Austin, TX 78750

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Engineer

**Employer (See Instructions)**  
Freescale

**Date** 02/28/2010  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
McNamara, Billy J. (Mr.)

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

**Contributor address; City; State; Zip Code**  
10920-C Crown Colony Dr  
Austin, TX 78747-1636

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Marketing Manager

**Employer (See Instructions)**  
Triple S Petroleum

**Date** 06/26/2010  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
McNamara, Billy J. (Mr.)

**Amount of contribution (\$)** \$75.00  
**In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
10920-C Crown Colony Dr  
Austin, TX 78747-1636

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Marketing Manager

**Employer (See Instructions)**  
Triple S Petroleum

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/13 Report: 11/26	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date 06/19/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNamara, Jerry (Mr.)  6 Contributor address; City; State; Zip Code 2704 Burnwood Ct. Arlington, TX 76016	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Facilities Manager		10 Employer (See Instructions) Champion Cheer Allstars	
Date 06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McPhee, Gerald  Contributor address; City; State; Zip Code 10731 Casper Street Kensington, MD 20895	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) VP Government Relations		Employer (See Instructions) Occidental Petroleum	
Date 06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Grady, Patrick  Contributor address; City; State; Zip Code 701 Rogart Drive Briar Cliff, TX 78669	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pierce, Bill  Contributor address; City; State; Zip Code 8205 Silver Ridge Austin, TX 78759	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired Military	
Date 03/19/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rainosek, Gary E. (Mr.)  Contributor address; City; State; Zip Code 10304 Old San Antonio Austin, TX 78748	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director of Marketing and Sales		Employer (See Instructions) PMG	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/13 Report: 12/26	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date 06/26/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rainosek, Gary E. (Mr.) ..... 6 Contributor address; City; State; Zip Code 10304 Old San Antonio Austin, TX 78748	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Director of Marketing and Sales		10 Employer (See Instructions) PMG	
Date 01/29/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randall, James B. (Mr.) ..... Contributor address; City; State; Zip Code 6402 Haney Dr. Austin, TX 78723	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) State of Texas		Employer (See Instructions) Retired	
Date 06/10/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Terasita (Ms.) ..... Contributor address; City; State; Zip Code 9000 Happy Trail Austin, TX 78745	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 06/06/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rountree, Betty ..... Contributor address; City; State; Zip Code 3505 Carla Drive Austin, TX 78754	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salinas, Bernardo (Mr.) ..... Contributor address; City; State; Zip Code 7211 Easy Wind Dr. Unit 1334 Austin, TX 78752	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)       (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Software Development		Employer (See Instructions) SCCI	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 11/13 Report: 13/26

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00007207

4 Date  
02/03/2010

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Sawyer, Donald J. (Mr.)

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

6 Contributor address; City; State; Zip Code  
809 E. 49th St  
Austin, TX 78751

\$300.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Pastor

10 Employer (See Instructions)  
Self

Date  
06/26/2010

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Sawyer, Donald J. (Mr.)

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

Contributor address; City; State; Zip Code  
809 E. 49th St  
Austin, TX 78751

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Pastor

Employer (See Instructions)  
Self

Date  
06/26/2010

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

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

Contributor address; City; State; Zip Code  
9223 Independence Loop  
Austin, TX 78749

\$75.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Customer Service

Employer (See Instructions)  
Activant

Date  
06/26/2010

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

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

Contributor address; City; State; Zip Code  
4011 Ave D  
Austin, TX 78752

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Campaign

Employer (See Instructions)  
Campaign

Date  
06/26/2010

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Stike, Davida (Ms.)

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

Contributor address; City; State; Zip Code  
18022 Newgrange Drive  
Pflugerville, TX 78660

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/13 Report: 14/26	
2 FILER NAME    McNamara, Mike (Mr.)		3 ACCOUNT #    (Ethics Commission filers) 00007207	
4 Date  06/19/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Suhanin, Bill (Mr.)  6 Contributor address;    City; State; Zip Code 2300 Pine Valley Drive Austin, TX 78747	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) Retired	
Date  06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trochta, Joe  Contributor address;    City; State; Zip Code 4025 Tealwood Austin, TX 78731	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vandewalle, Mike (Mr.)  Contributor address;    City; State; Zip Code 6602 Three Oaks Circle Austin, TX 78759	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Self	
Date  06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wacker, Mike  Contributor address;    City; State; Zip Code 10820 Olympa Fields Loop Austin, TX 78747	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wehbe, Najib (Mr.)  Contributor address;    City; State; Zip Code 5902 Mountain Villa Dr Austin, TX 78731	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 13/13 Report: 15/26	
<b>2</b> FILER NAME    McNamara, Mike (Mr.)		<b>3</b> ACCOUNT #    (Ethics Commission filers) 00007207	
<b>4</b> Date  06/26/2010	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whatley, Keith  ..... <b>6</b> Contributor address;    City; State; Zip Code 4203 Edgemont Austin, TX 78731	<b>7</b> Amount of contribution (\$)      \$40.00	<b>8</b> In-kind contribution description (if applicable)     
<b>9</b> Principal occupation / Job title (See Instructions) Investment Advisor		<b>10</b> Employer (See Instructions) Robert Harrel Inc	
Date  01/29/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whatley, R.T. (Mr.)  ..... Contributor address;    City; State; Zip Code 3920 Coopers Hawk Cv Austin, TX 78738	Amount of contribution (\$)      \$100.00	In-kind contribution description (if applicable)     
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whatley, R.T. (Mr.)  ..... Contributor address;    City; State; Zip Code 3920 Coopers Hawk Cv Austin, TX 78738	Amount of contribution (\$)      \$50.00	In-kind contribution description (if applicable)     
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/08/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wooten, Marlene  ..... Contributor address;    City; State; Zip Code 9700 Springdale Rd Austin, TX 78754	Amount of contribution (\$)      \$100.00	In-kind contribution description (if applicable)     
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date  06/08/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zimmerman, Patricia  ..... Contributor address;    City; State; Zip Code 6813 De Paul Cove Austin, TX 78723	Amount of contribution (\$)      \$100.00	In-kind contribution description (if applicable)     
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/5 Report: 16/26		<b>2 FILER NAME</b> McNamara, Mike (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00007207	
<b>4 Date</b> 06/26/2010	<b>5 Payee name</b> American Legion Post 76				
<b>6 Amount (\$)</b> \$600.00	<b>7 Payee address City; State; Zip Code</b> 2201 Veteran's Drive Austin, TX 78703				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Facility Rental Fee		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 03/26/2010	<b>Payee name</b> Austin Republican Women				
<b>Amount (\$)</b> \$25.00	<b>Payee address City; State; Zip Code</b> 6820 Cypress Point North Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Luncheon Attendance Fee		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 04/06/2010	<b>Payee name</b> Austin Republican Women				
<b>Amount (\$)</b> \$25.00	<b>Payee address City; State; Zip Code</b> 6820 Cypress Point North Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Luncheon Attendance Fee		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/20/2010	<b>Payee name</b> Donna Davidson Attorney				
<b>Amount (\$)</b> \$300.00	<b>Payee address City; State; Zip Code</b> P.O. Box 12131 Austin, TX 78711				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Legal Services		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Ethics consulting		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/5 Report: 17/26	<b>2 FILER NAME</b> McNamara, Mike (Mr.)	<b>3 ACCOUNT # (TEC filers)</b> 00007207
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<b>4 Date</b> 03/26/2010	<b>5 Payee name</b> Eternallife Production
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<b>6 Amount (\$)</b> \$350.00	<b>7 Payee address City; State; Zip Code</b> 339 Cottletown Road Smithville, TX 78957
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Website Design and development
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 06/05/2010	<b>Payee name</b> Eternallife Production
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<b>Amount (\$)</b> \$325.00	<b>Payee address City; State; Zip Code</b> 339 Cottletown Road Smithville, TX 78957
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Website Design and Development
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 01/07/2010	<b>Payee name</b> GoDaddy.com
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<b>Amount (\$)</b> \$10.81	<b>Payee address City; State; Zip Code</b> 14455 N. Hayden Rd, Suite 219 Scottsdale, AZ 85260
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Purchase of Website Domain
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 04/24/2010	<b>Payee name</b> Hill Country Republican Women
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<b>Amount (\$)</b> \$50.00	<b>Payee address City; State; Zip Code</b> 1108 Lavaca, Suite 505 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Style Show attendance fee
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/5 Report: 18/26		<b>2 FILER NAME</b> McNamara, Mike (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00007207	
<b>4 Date</b> 05/13/2010	<b>5 Payee name</b> Jerry Patterson Campaign				
<b>6 Amount (\$)</b> \$75.00	<b>7 Payee address City; State; Zip Code</b> P.O. Box 40218 Austin, TX 78704				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Donation		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 04/25/2010	<b>Payee name</b> Lulac Dist VII				
<b>Amount (\$)</b> \$50.00	<b>Payee address City; State; Zip Code</b> 111 Cesar Chavez Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Convention Participation Fee		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 02/16/2010	<b>Payee name</b> LunarPages				
<b>Amount (\$)</b> \$107.40	<b>Payee address City; State; Zip Code</b> 1360 N. Hancock Street Anaheim, CA 92807				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Website Hosting		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 05/24/2010	<b>Payee name</b> Office Depot				
<b>Amount (\$)</b> \$66.95	<b>Payee address City; State; Zip Code</b> 816 Tirado Street Austin, TX 78752				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> office Supplies		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/5 Report: 19/26	<b>2 FILER NAME</b> McNamara, Mike (Mr.)	<b>3 ACCOUNT # (TEC filers)</b> 00007207
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<b>4 Date</b> 06/21/2010	<b>5 Payee name</b> Postmaster
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<b>6 Amount (\$)</b> \$17.60	<b>7 Payee address</b> City; State; Zip Code Northeast Station Austin, TX
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Postage
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>	<b>Office sought:</b>	<b>Office held:</b>
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<b>Date</b> 06/30/2010	<b>Payee name</b> Postmaster
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<b>Amount (\$)</b> \$224.00	<b>Payee address</b> City; State; Zip Code Northeast Station Austin, TX
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Postage for Event Mailing
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>	<b>Office sought:</b>	<b>Office held:</b>
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<b>Date</b> 03/19/2010	<b>Payee name</b> Travis County Republican Party
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<b>Amount (\$)</b> \$25.00	<b>Payee address</b> City; State; Zip Code 7901 Cameron Rd. #3-202 Austin, TX 78754
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> County Convention
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>	<b>Office sought:</b>	<b>Office held:</b>
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<b>Date</b> 05/15/2010	<b>Payee name</b> Travis County Republican Party
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<b>Amount (\$)</b> \$25.00	<b>Payee address</b> City; State; Zip Code 7901 Cameron Rd. #3-202 Austin, TX 78754
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Reagan Day Luncheon
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>	<b>Office sought:</b>	<b>Office held:</b>
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/5 Report: 20/26	<b>2</b> FILER NAME McNamara, Mike (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00007207
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<b>4</b> Date 06/30/2010	<b>5</b> Payee name Vista Print
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<b>6</b> Amount (\$) \$240.41	<b>7</b> Payee address City; State; Zip Code 95 Hayden Avenue Lexington, MA 02421
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Invitations for Event
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/5 Report: 21/26		<b>2 FILER NAME</b> McNamara, Mike (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00007207	
<b>4 Date</b> 02/18/2010		<b>5 Payee name</b> 823 Congress Garage			
<b>6 Amount (\$)</b> \$11.00 <input type="checkbox"/> Reimbursement from political contributions intended		<b>7 Payee address</b> City; State; Zip Code 823 Congress Ave Austin, TX 78701			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Parking Fee for event attendance	
<b>Date</b> 03/15/2010		<b>Payee name</b> Bells Int'l			
<b>Amount (\$)</b> \$198.54 <input type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 109 Denson Dr. Austin, TX 78752			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign Materials	
<b>Date</b> 03/23/2010		<b>Payee name</b> City of Austin			
<b>Amount (\$)</b> \$1.75 <input type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code P.O. Box 1088 Austin, TX 78767			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Parking Fee for campaign event	
<b>Date</b> 06/25/2010		<b>Payee name</b> Costco			
<b>Amount (\$)</b> \$52.52 <input type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 10404 Research Blvd Austin, TX 78759			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Event Supplies for Reception	

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/5 Report: 22/26		<b>2 FILER NAME</b> McNamara, Mike (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00007207	
<b>4 Date</b> 01/28/2010		<b>5 Payee name</b> Dobie Parking Garage			
<b>6 Amount (\$)</b> \$6.00 <input type="checkbox"/> Reimbursement from political contributions intended		<b>7 Payee address</b> City; State; Zip Code 2005 Whitis Avenue Austin, TX 78705			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Parking Fee	
<b>Date</b> 05/04/2010		<b>Payee name</b> Doubletree Hotel			
<b>Amount (\$)</b> \$30.00 <input type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 6505 N. IH 35 Austin, TX 78752			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> attend prayer breakfast	
<b>Date</b> 03/18/2010		<b>Payee name</b> Fedex Kinkos			
<b>Amount (\$)</b> \$25.42 <input type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 9222 Burnet Road Ste 101 Austin, TX 78758			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign Handouts for Convention	
<b>Date</b> 03/06/2010		<b>Payee name</b> Jack Lot Parking			
<b>Amount (\$)</b> \$7.00 <input type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 11215 Research Blvd #2095 Austin, TX 78759			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Parking Fee for meeting	

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 3/5 Report: 23/26	<b>2</b> FILER NAME McNamara, Mike (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00007207
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<b>4</b> Date 03/30/2010	<b>5</b> Payee name JCPenney Portraits
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<b>6</b> Amount (\$) \$140.07 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address City; State; Zip Code 9500 S I H 35 Austin, TX 78748
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<b>8</b> 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) <input type="checkbox"/> Pictures for materials
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Date 01/19/2010	Payee name Office Depot
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Amount (\$) \$69.25 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 816 Tirado Street Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign materials
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Date 06/08/2010	Payee name Office Depot
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Amount (\$) \$7.88 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 816 Tirado Street Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Supplies
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Date 06/08/2010	Payee name Office Depot
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Amount (\$) \$2.15 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 816 Tirado Street Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Supplies
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/5 Report: 24/26	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 06/21/2010	5 Payee name Postmaster
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6 Amount (\$) \$17.60 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code Northeast Station Austin, TX
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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) <input type="checkbox"/> Postage for campaign mailing
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Date 02/13/2010	Payee name Walgreens
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Amount (\$) \$7.77 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 11742 Research Blvd Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies
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Date 02/19/2010	Payee name Walgreens
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Amount (\$) \$11.68 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 11742 Research Blvd Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Photos
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Date 02/25/2010	Payee name Walgreens
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Amount (\$) \$11.68 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 11742 Research Blvd Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Photos
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 5/5 Report: 25/26		<b>2 FILER NAME</b> McNamara, Mike (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00007207	
<b>4 Date</b> 06/01/2010	<b>5 Payee name</b> Walgreens				
<b>6 Amount (\$)</b> \$19.26 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7 Payee address</b> City; State; Zip Code 11742 Research Blvd Austin, TX 78759				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Photos printing		
<b>Date</b> 06/07/2010	<b>Payee name</b> Walgreens				
<b>Amount (\$)</b> \$10.27 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City; State; Zip Code 11742 Research Blvd Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Photos		
<b>Date</b> 06/07/2010	<b>Payee name</b> Walgreens				
<b>Amount (\$)</b> \$17.60 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City; State; Zip Code 11742 Research Blvd Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Supplies		
<b>Date</b> 06/15/2010	<b>Payee name</b> Walgreens				
<b>Amount (\$)</b> \$7.88 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City; State; Zip Code 11742 Research Blvd Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Photos		

Information entered by filer as a memo

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Schedule    Cover Sheet

NOTE: On review of accounting on 7/15/2010, it was determined that Donovan Millworks was a corporate contribuion and immediately have refunded the contribution dated 7/15/2010 upon clarification. The amount will be shown as a refund on our next finance report.