

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

7421

**FORM JC/OH
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: 60
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. John ----- NICKNAME LAST SUFFIX Lipscombe	<div style="text-align: center; font-weight: bold;">OFFICE USE ONLY</div> <div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> FILED FOR RECORD 2010 JUL 15 PM 4:50 CLERK TARRANT COUNTY TEXAS </div> <div style="text-align: center;"> Date Received Date Hand-delivered Date Postmarked Receipt # Amount Date Processed Date Imaged </div> </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 902 E. 5th St. #204 Austin, Texas, 78702		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 4853003		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Emma ----- NICKNAME LAST SUFFIX Barrientos		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2906 Gem Circle Austin, Texas, 78704		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 442-7233		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 2 / 21 / 2010 6 / 30 / 2010		
11 ELECTION	ELECTION DATE Month Day Year 7 / 15 / 2010	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) County Court at Law in District #3	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name Address / PO Box; Apt. / Suite #; City; State; Zip Code		

GO TO PAGE 2

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

15 C/OH NAME
John Lipscombe

16 ACCOUNT # (Ethics Commission Filers)

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"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		John H. Lipscombe
		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)	\$ 23521.31
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 40598.89
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8032.64
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.



[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John Lipscombe, this the Fifteenth day of July, 2010, to certify which, witness my hand and seal of office.

Cynthia H Flint Cynthia H Flint Notary Public
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 1 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/21/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher P. Morgan	7 Amount of contribution (\$) 50.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 8812 Tallwood Dr. no.89 AUSTIN, TX 78759		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation lawyer	10 Contributor's job title lawyer
11 Contributor's employer/law firm self	12 Law firm of contributor's spouse (if any)

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

Date 2/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosanne Scott	Amount of contribution (\$) 75.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 7307 Jester Blvd Austin, TX 78750		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Human Resources	Contributor's job title
Contributor's employer/law firm Self	Law firm of contributor's spouse (if any)

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

Date 2/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathleen Wilson	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 5922 Mountain Villa Dr. Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Sculptor	Contributor's job title
Contributor's employer/law firm Self	Law firm of contributor's spouse (if any)

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

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 2 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/22/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Devany	7 Amount of contribution (\$) 25.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 4821 Twin Valley Dr. Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Actor	10 Contributor's job title
11 Contributor's employer/law firm Self	12 Law firm of contributor's spouse (if any)

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

Date 2/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bharati Kommineni	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 4203 Cat Mountain Dr Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Computer Software	Contributor's job title
Contributor's employer/law firm Oracle	Law firm of contributor's spouse (if any)

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

Date 2/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thuy-Nhi "Tweeny" Morel	Amount of contribution (\$) 150.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 3508 Far W. Blvd Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney	Contributor's job title
Contributor's employer/law firm Self	Law firm of contributor's spouse (if any)

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

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 3 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/22/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin Spears, Jr.	7 Amount of contribution (\$) 200.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code Barton Oaks Plaza One Suite 420 Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Attorney	10 Contributor's job title partner
11 Contributor's employer/law firm Arenson & Spears	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date 2/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken Oden	Amount of contribution (\$) 1000.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1506 Gaston Ave Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Linebarger Goggen Blair Sampson	Contributor's job title
Contributor's employer/law firm Attorney	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

Date 2/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Reid	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1104 Wayside Drive Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Retired	Contributor's job title
Contributor's employer/law firm Retired	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J):
4 of 38

2 FILER NAME
John Lipscombe 3 ACCOUNT # (Ethics Commission filers)

4 Date 2/22/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle M. Galaviz	7 Amount of contribution (\$) 50.00	8 In-kind contribution description(if applicable)
	6 Contributor address; City; State; Zip Code 10206 Maydelle Drive Austin, TX 78748	(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Attorney	10 Contributor's job title Owner
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11 Contributor's employer/law firm Law Office of Michelle M. Galaviz	12 Law firm of contributor's spouse (if any) Office of Inspector General
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13 If contributor is a child, law firm of parent(s) (if any)

Date 2/23/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris McKay	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code 2526 Tanglewood Trail Austin, TX 78703	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Exec	Contributor's job title VP
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Contributor's employer/law firm SAMBA Holdings, Inc.	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

Date 2/23/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathryn Blackbird	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code P.O. Box 49337 Austin, TX 78765	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney/ Art Appraiser	Contributor's job title Attorney
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Contributor's employer/law firm Self	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J):
5 of 38

2 FILER NAME
John Lipscombe 3 ACCOUNT # (Ethics Commission filers)

4 Date 2/23/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward P Martin	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 1307 Barton Hills Dr. Apt. 8 Austin, TX 78704	(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation
Consultant 10 Contributor's job title
Communications Specialist

11 Contributor's employer/law firm
Self 12 Law firm of contributor's spouse (if any)

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

Date 2/23/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristin Runkle	Amount of contribution (\$) 2000.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 4705 Frontier Trail Austin, TX 78745	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation
Attorney Contributor's job title

Contributor's employer/law firm
Texas Legislative Council Law firm of contributor's spouse (if any)

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

Date 2/23/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Roark	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1307 West Ave Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation
Attorney Contributor's job title
partner

Contributor's employer/law firm
Botsford & Roark Law firm of contributor's spouse (if any)

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

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 6 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/23/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Ramsey	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 506 W. 16th Street Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Attorney	10 Contributor's job title
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11 Contributor's employer/law firm Cantey & Hanger	12 Law firm of contributor's spouse (if any)
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13 If contributor is a child, law firm of parent(s) (if any)

Date 2/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AFSCME	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1625 L Street, NW Washington, DC 20036		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation	Contributor's job title
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Contributor's employer/law firm	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

Date 2/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jody Sims	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10617 N. Platt River Dr. Austin, TX 78748		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney	Contributor's job title
--	-------------------------

Contributor's employer/law firm Self	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 7 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/24/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken Mahaffey	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 684585 Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Attorney	10 Contributor's job title Attorney
11 Contributor's employer/law firm Self	12 Law firm of contributor's spouse (if any)

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

Date 2/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Botsford	Amount of contribution (\$) 500.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1307 West Avenue Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney	Contributor's job title Partner
Contributor's employer/law firm Botsford & Roark	Law firm of contributor's spouse (if any)

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

Date 2/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick O'Connell	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 5408 Hurlock Dr. Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney	Contributor's job title Attorney
Contributor's employer/law firm Baron & Budd	Law firm of contributor's spouse (if any) Baron & Budd

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

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 8 of 38	
2 FILER NAME: John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/25/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker McCollough	7 Amount of contribution (\$) 200.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 1703 Flintridge Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Vice President of Government Affairs		10 Contributor's job title	
11 Contributor's employer/law firm Entergy Texas		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 2/25/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Campbell	Amount of contribution (\$) 200.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1601 Rio Grande Ste 405 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Law Office of John F. Campbell PC		Contributor's job title	
Contributor's employer/law firm Attorney		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 2/25/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Luna	Amount of contribution (\$) 200.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 8617 Minot Circle Austin, TX 78748		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J). 9 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/25/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ira Davis	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 1012 Rio Grande Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm The Law Office of Ira L. Davis		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 2/25/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vic Fezell	Amount of contribution (\$) 1000.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 6618 Sitio Del Rio Boulevard Building C-101 Austin, TX 78730		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Law Offices of Vic Fezell		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 2/25/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthew Shrum	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 505 W. 15th St. Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Partner	
Contributor's employer/law firm Law Office of Matt Shrum		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 10 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/25/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashliegh Blythe Naylor	7 Amount of contribution (\$) 200.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 12918 Candlestick Place Austin, TX 78727		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Admin Assistant/Independent Consultant		10 Contributor's job title Construction Admin Assistant	
11 Contributor's employer/law firm Self Employed		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 2/27/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Jimmy Evans	Amount of contribution (\$) 400.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 5617 Medicine Creek Austin, TX 78735		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Family Law Attorney	
Contributor's employer/law firm Evans & Peek		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 2/28/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramanjeet Gill	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 4308 Bellvue Ave. Austin, TX 78756		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Sumpter & Gonzalez		Law firm of contributor's spouse (if any) Texas RioGrande Legal Aid	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. **1** Total pages Schedule A(J):
11 of 38

2 FILER NAME
John Lipscombe **3** ACCOUNT # (Ethics Commission filers)

4 Date 3/1/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Laden	7 Amount of contribution (\$) 200.00	8 In-kind contribution description(if applicable)
	6 Contributor address; City; State; Zip Code 111 Congress Avenue Ste 1080 Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation
Attorney **10** Contributor's job title

11 Contributor's employer/law firm
Law Office of Larry Laden **12** Law firm of contributor's spouse (if any)

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

Date 3/1/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lou McCreary	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code 901 S MOPAC Expy Austin, TX 78746	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation
Attorney Contributor's job title

Contributor's employer/law firm
Lou McCreary Attorney at Law Law firm of contributor's spouse (if any)

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

Date 3/1/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie Rodman	Amount of contribution (\$) 200.00	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code 1307 Nueces Street Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation
Self Contributor's job title

Contributor's employer/law firm
Attorney Law firm of contributor's spouse (if any)

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

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

<i>The Instruction Guide explains how to complete this form.</i>		1 Total pages Schedule A(J): 12 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/1/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura K Kolstad	7 Amount of contribution (\$) 250.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 7108 Teaberry Dr Austin, TX 78745		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Analyst		10 Contributor's job title Analyst	
11 Contributor's employer/law firm State of Texas		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 3/1/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Avitt	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1500 Brentwood St Austin, TX 78757		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation n/a		Contributor's job title	
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/1/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desha Melton	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1500 Brentwood Street Austin, TX 78757		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation n/a		Contributor's job title	
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 13 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/1/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Harris	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 2402 Bluffview Drive Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation n/a		10 Contributor's job title	
11 Contributor's employer/law firm n/a		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 3/1/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryan Case	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code P. O. Box 1748 Austin, TX 78767		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Assistant District Attorney		Contributor's job title	
Contributor's employer/law firm District Attorney's Office		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 3/1/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trichter & Murphy PC	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 2000 Smith Street Houston, TX 77002		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 14 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/1/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennie Ray	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 1307 West Avenue Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 3/1/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Scharmen	Amount of contribution (\$) 500.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 315 Dwyer Ave. San Antonio, TX 78204		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation SelfLaw Offices of George Scharmen		Contributor's job title	
Contributor's employer/law firm Attorney		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/2/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karl-Thomas Geddes Musselman	Amount of contribution (\$) 6.31	In-kind contribution description(if applicable) Online Advertising
Contributor address; City; State; Zip Code 1512 A Pennsylvania Ave Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Online Communications		Contributor's job title Consultant	
Contributor's employer/law firm ActBlue		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 15 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/8/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Mallios 6 Contributor address; City; State; Zip Code 2106 Toro Canyon Rd Austin, TX 78746	7 Amount of contribution (\$) 250.00 <i>(If travel outside of Texas, complete Schedule T)</i>	8 In-kind contribution description(if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm Mallios & Associates		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 3/8/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison Lynn Bowers Contributor address; City; State; Zip Code 1702 Meadowbrook Drive Austin, TX 78703	Amount of contribution (\$) 50.00 <i>(If travel outside of Texas, complete Schedule T)</i>	In-kind contribution description(if applicable)
Contributor's principal occupation lawyer		Contributor's job title Special Counsel	
Contributor's employer/law firm Baker Botts		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 3/8/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Bishop Contributor address; City; State; Zip Code 115 Wild Basin Road Ste. 106 Austin, TX 78746	Amount of contribution (\$) 100.00 <i>(If travel outside of Texas, complete Schedule T)</i>	In-kind contribution description(if applicable)
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 16 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/8/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karl-Thomas Musselman	7 Amount of contribution (\$) 10.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 1512 A Pennsylvania Ave Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Fundraising	10 Contributor's job title Advisor
11 Contributor's employer/law firm ActBlue	12 Law firm of contributor's spouse (if any)

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

Date 3/8/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cather A Mauzy	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 3201 Bryker Dr Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney	Contributor's job title Attorney
Contributor's employer/law firm Self	Law firm of contributor's spouse (if any) n/a

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

Date 3/8/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwinna Gayle Cipriano	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 7903 Bracken Ct Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation attorney	Contributor's job title attorney
Contributor's employer/law firm self	Law firm of contributor's spouse (if any)

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

<i>The Instruction Guide explains how to complete this form.</i>		1 Total pages Schedule A(J): 17 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/8/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimmy Connor Ochs	7 Amount of contribution (\$) 25.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 8545 Pickwick Ln. #D Dallas, TX 75225		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Social Worker	10 Contributor's job title Program Director
11 Contributor's employer/law firm Phoenix House	12 Law firm of contributor's spouse (if any) na
13 If contributor is a child, law firm of parent(s) (if any)	

Date 3/8/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jan Soifer	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 5408 Hurlock Drive Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation lawyer		Contributor's job title Special Counsel	
Contributor's employer/law firm Baron & Budd, P.C.		Law firm of contributor's spouse (if any) Baron & Budd, P.C.	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/8/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnny o limon	Amount of contribution (\$) 25.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 908 calle limon austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation retired		Contributor's job title retired	
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 18 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/9/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Gunnar Nagle	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 2703 Maria Anna Road Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Owner	
11 Contributor's employer/law firm Stephen Nagle & Associates		12 Law firm of contributor's spouse (if any) none	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 3/11/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Holt Walcutt	Amount of contribution (\$) 25.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1405 Westover Road Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Owner	
Contributor's employer/law firm Law Office of Paul Holt Walcutt		Law firm of contributor's spouse (if any) Advocacy, Inc.	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/11/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Wetzel	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 411 West Ave. Ste. 100 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 19 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/11/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) william (Bill) Gibson	7 Amount of contribution (\$) 50.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 1403 Hillcrest Dr. 512/452-7930 Austin, TX 78723-3184		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Fraud Investigator	10 Contributor's job title Investigator
11 Contributor's employer/law firm Retired State of Texas	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date 3/11/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Beeson	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 4730 Eck Lane Austin, TX 78734		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Atty		Contributor's job title Owner	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/12/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Spencer	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 3006 Hemphill Park Drive Austin, TX 78705		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation lawyer		Contributor's job title Owner/Lawyer	
Contributor's employer/law firm Law Office of Jamie Spencer		Law firm of contributor's spouse (if any) none	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. **1** Total pages Schedule A(J).
20 of 38

2 FILER NAME
John Lipscombe **3** ACCOUNT # (Ethics Commission filers)

4 Date 3/12/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Popper	7 Amount of contribution (\$) 500.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 6409 Gouldville Court Austin, TX 78739		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation
Attorney **10** Contributor's job title
Attorney

11 Contributor's employer/law firm
Self **12** Law firm of contributor's spouse (if any)

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

Date 3/12/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hugh Brady	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code PO Box 13132 Austin, TX 78711		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation
Attorney Contributor's job title
Attorney

Contributor's employer/law firm
Self Law firm of contributor's spouse (if any)

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

Date 3/12/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernabe Arreguin	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 8609 1 Street Austin, TX 78748		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation
Bailiff Contributor's job title

Contributor's employer/law firm
Travis County Law firm of contributor's spouse (if any)

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 21 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/12/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coke Dilworth	7 Amount of contribution (\$) 50.00	8 In-kind contribution description(if applicable)
	6 Contributor address; City; State; Zip Code 415 Brady Lane Austin, TX 78746	(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Retired	10 Contributor's job title
11 Contributor's employer/law firm None	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date 3/12/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Futch	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code 100 Congress Ave Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm Attorney		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/12/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam J. Johnson	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code 600 Congress Ave., Suite 1500 Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation lawyer		Contributor's job title	
Contributor's employer/law firm Scott, Douglass & McConnico		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 22 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/12/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip Presse 6 Contributor address; City; State; Zip Code 819 1/2 West 11th St Austin, TX 78701	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation attorney	10 Contributor's job title attorney
11 Contributor's employer/law firm self	12 Law firm of contributor's spouse (if any)

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

Date 3/16/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecelia M Burke Contributor address; City; State; Zip Code 6500 Santolina Cove Austin, TX 78731	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
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(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation Retired	Contributor's job title Retired
Contributor's employer/law firm Retired	Law firm of contributor's spouse (if any)

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

Date 3/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan Reaud Contributor address; City; State; Zip Code 1231 Parkway Austin, TX 78703	Amount of contribution (\$) 1000.00	In-kind contribution description(if applicable)
-----------------------	--	--	---

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation Attorney	Contributor's job title
Contributor's employer/law firm Reaud and Associates	Law firm of contributor's spouse (if any)

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 23 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/18/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecilia Crossley	7 Amount of contribution (\$) 20.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 3100 Catalina Dr Austin, TX 78741		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Retired		10 Contributor's job title	
11 Contributor's employer/law firm Retired		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 3/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip Friday	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 700 Lavaca St Ste 1150 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark McCrimmon	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 704 W 9th St Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J):
24 of 38

2 FILER NAME 3 ACCOUNT # (Ethics Commission filers)
John Lipscombe

4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Schilz	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
3/18/2010	6 Contributor address; City; State; Zip Code 3616 Claburn Dr Austin, TX 78759	100.00	
<i>(If travel outside of Texas, complete Schedule T)</i>			

9 Contributor's principal occupation: **Retired** 10 Contributor's job title

11 Contributor's employer/law firm: **Retired** 12 Law firm of contributor's spouse (if any)

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

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White & Measells	Amount of contribution (\$)	In-kind contribution description (if applicable)
3/18/2010	Contributor address; City; State; Zip Code 1205 Rio Grande Austin, TX 78701	250.00	
<i>(If travel outside of Texas, complete Schedule T)</i>			

Contributor's principal occupation Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

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

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Libby o Wood	Amount of contribution (\$)	In-kind contribution description (if applicable)
3/18/2010	Contributor address; City; State; Zip Code 3017 Parker Dr. Georgetown, TX 78628	100.00	
<i>(If travel outside of Texas, complete Schedule T)</i>			

Contributor's principal occupation: **retired side-tracked Home Executive//debate coach BS+** Contributor's job title

Contributor's employer/law firm: **self** Law firm of contributor's spouse (if any)

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J):
25 of 38

2 FILER NAME
John Lipscombe 3 ACCOUNT # (Ethics Commission filers)

4 Date 3/18/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunter and Bennett	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 600 W. 9th St Austin, TX 78701	(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

11 Contributor's employer/law firm 12 Law firm of contributor's spouse (if any)

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

Date 3/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Smith	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 10207 B River Plantation Dr Austin, TX 78747	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title
Attorney

Contributor's employer/law firm **Self** Law firm of contributor's spouse (if any)

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

Date 3/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair Dancy	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 4933 Strass Drive Austin, TX 78731	(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **lawyer** Contributor's job title
partner

Contributor's employer/law firm **Van Osselaer & Buchanan LLP** Law firm of contributor's spouse (if any)

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 26 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/18/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Dorbandt	7 Amount of contribution (\$) 500.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 603 W. 12th St Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Attorney	10 Contributor's job title Attorney
11 Contributor's employer/law firm Self	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date 3/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Rugeley	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 120 W Hopkins St San Marcos, TX 78666		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney	Contributor's job title Attorney
Contributor's employer/law firm Self	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

Date 3/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helen Spear	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 2615 Pecos Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Retired	Contributor's job title
Contributor's employer/law firm Retired	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 27 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/18/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin Spears, Jr.	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code Barton Oaks Plaza One Suite 420 Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title partner	
11 Contributor's employer/law firm Arenson & Spears		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 3/19/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID B. FRANK	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1212 GUADALUPE STREET SUITE 103 AUSTIN, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY	
Contributor's employer/law firm SELF		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May Schmidt	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1104 Maufrais St. Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Archeologist		Contributor's job title	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 28 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/24/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Trumpler	7 Amount of contribution (\$) 150.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 421 E. 6Th Suite A Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 3/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete Katz	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 22128 Briarcliff Dr. Spicewood, TX 78669		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Manager		Contributor's job title	
Contributor's employer/law firm Pedro Gatos Institute on Addiction, Health & Social		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Sauer, Jr	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 1004 West Avenue Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Law Office of Larry Sauer		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 29 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/24/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Turner	7 Amount of contribution (\$) 100.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 1504 West Ave. Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 3/29/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim James	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code PO Box 1146 Bryan, TX 77806		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 3/29/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur Troilo	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 700 E. 11th St. Ste. 103 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Arthur Troilo III Attn At Law		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J). 30 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/29/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Gibson	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 700 Lavaca St., Suite 1010 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm Kenneth M. Gibson, P.C.		12 Law firm of contributor's spouse (if any)	

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

Date 4/5/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernando Martinez	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1604 San Antonio St. Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	

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

Date 4/26/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Martinez Law Firm	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2101 S. IH 35 Ste 201 Austin, TX 78741		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 31 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 5/6/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Fox 6 Contributor address; City; State; Zip Code 404 W. 13th St Austin, TX 78701	7 Amount of contribution (\$) 250.00	8 In-kind contribution description(if applicable)
		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 6/10/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Connor Ochs Jr Contributor address; City; State; Zip Code 8545 Pickwick Ln. #D Dallas, TX 75225	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Social Worker		Contributor's job title Program Director	
Contributor's employer/law firm Phoenix House		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 6/15/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton Richards Contributor address; City; State; Zip Code 7102 Coachwhip Hollow Austin, TX 78750-0820	Amount of contribution (\$) 25.00	In-kind contribution description(if applicable)
		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation retired		Contributor's job title none	
Contributor's employer/law firm none		Law firm of contributor's spouse (if any) none	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 32 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/20/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Ross Pumfrey	7 Amount of contribution (\$) 25.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 8716 Towana Trail Austin, TX 78736		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Environmental Program Coordinator		10 Contributor's job title Senior Program Coordinator	
11 Contributor's employer/law firm University of Texas at Austin		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 6/21/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ian Inglis	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 800 W 5th St Apt 805 Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Solo Practitioner	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 6/21/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha S. Dickie	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 503 Brookhaven Trail Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title partner	
Contributor's employer/law firm Almanza, Blackburn and Dickie LLP		Law firm of contributor's spouse (if any) Lower Colo River Authority	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 33 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/22/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBB WILLIAM SHEPHERD	7 Amount of contribution (\$) 250.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code P. O. Box 2526 AUSTIN, TX 78768		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney at Law	
11 Contributor's employer/law firm Robb Wm. Shepherd, P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 6/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Labuda	Amount of contribution (\$) 25.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 2000 Delvin Lane Austin, TX 78728-8680		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation IT		Contributor's job title IT Support Analyst	
Contributor's employer/law firm Visual Click Software, Inc.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 6/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Spencer	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 3006 Hemphill Park Austin, TX 78705		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Lawyer		Contributor's job title Lawyer	
Contributor's employer/law firm Law Office of Jamie Spencer		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 34 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/22/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dona Avery Tabrizi	7 Amount of contribution (\$) 35.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 10005 Pickfair Drive Austin, TX 78750		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Mom	10 Contributor's job title n/a
11 Contributor's employer/law firm n/a	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date 6/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David M Douglas	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 6404 Oasis Drive Austin, TX 78749		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Lawyer	Contributor's job title Asst. City Attorney
Contributor's employer/law firm City of Austin	Law firm of contributor's spouse (if any) none
If contributor is a child, law firm of parent(s) (if any)	

Date 6/23/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Martinez	Amount of contribution (\$) 50.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 608-B West Oltorf P. O. Box 42436 Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney	Contributor's job title Criminal Defense Attorney
Contributor's employer/law firm Law Office of Gilbert Martinez	Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 35 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/23/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamala Barksdale	7 Amount of contribution (\$) 50.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 10711 Jonwood Way Austin, TX 78753		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation PR and Advertising		10 Contributor's job title Director of Marketing	
11 Contributor's employer/law firm EnviroMedia		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 6/30/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) susan gutzke	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 10711 misting falls trail austin, TX 78759		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 5/3/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Fox	Amount of contribution (\$) 250.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 404 W. 13th St Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J). 36 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission files)	
4 Date 5/20/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers & Associates	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 1104 Nueces St. Suite. 208 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 4/19/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Eby	Amount of contribution (\$) 100.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 5401 Mt. Bonnell Rd Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Retired		Contributor's job title	
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 5/19/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Dorbandt & Associates	Amount of contribution (\$) 1000.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 603 W. 12th St. Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 37 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/22/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen Watkins	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 600 Congress Ave. Ste. 2100 Austin, TX 78702		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm McGinnis, Lochridge & Kilgore		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 5/11/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie Baird	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 1242 Austin, TX 78767		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Judge		Contributor's job title	
Contributor's employer/law firm Travis County		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 6/21/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donna Beth McCormick	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5703 Shoalwood Avenue Austin, TX 78756		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Retired		Contributor's job title	
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 38 of 38	
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/10/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Davis	7 Amount of contribution (\$) 200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code PO Box 16665 Austin, TX 78761		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation County Commissioner		10 Contributor's job title County Commissioner	
11 Contributor's employer/law firm Travis County		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 6/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecilia Burke	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6500 Santolina Cv Austin, TX 78731		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Administrator		Contributor's job title	
Contributor's employer/law firm Travis County		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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POLITICAL EXPENDITURES	SCHEDULE F
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule F: 1 of 20
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2 FILER NAME John Lipscombe	3 ACCOUNT # (Ethics Commission filers)
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4 Date 2/21/2010	5 Payee name Piryx, Inc. ----- 6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	7 Amount (\$) 2.25
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8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/22/2010	Payee name Piryx, Inc. ----- Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 2.25
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/23/2010	Payee name Piryx, Inc. ----- Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 11.25
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/23/2010	Payee name Piryx, Inc. ----- Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 4.50
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES	SCHEDULE F
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule F: 2 of 20
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2 FILER NAME John Lipscombe	3 ACCOUNT # (Ethics Commission filers)
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4 Date 2/23/2010	5 Payee name Piryx, Inc. ----- 6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	7 Amount (\$) 4.50
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8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/24/2010	Payee name Piryx, Inc. ----- Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 4.50
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/24/2010	Payee name Piryx, Inc. ----- Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 4.50
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/25/2010	Payee name Piryx, Inc. ----- Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 9.00
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	1 Total pages Schedule F: 3 of 20
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2 FILER NAME John Lipscombe	3 ACCOUNT # (Ethics Commission filers)
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4 Date 2/27/2010	5 Payee name Piryx, Inc. ----- 6 Payee address: City: State: Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	7 Amount (\$) 18.00
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8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/28/2010	Payee name Piryx, Inc. ----- Payee address: City: State: Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 2.25
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 3/8/2010	Payee name Piryx, Inc. ----- Payee address: City: State: Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 2.25
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 3/8/2010	Payee name Piryx, Inc. ----- Payee address: City: State: Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 0.45
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Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES **SCHEDULE F**

The Instruction Guide explains how to complete this form. **1** Total pages Schedule F:
4 of 20

2 FILER NAME
John Lipscombe **3** ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name Piryx, Inc.	7 Amount (\$)
3/8/2010	6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	2.25

8 Purpose of payment (See instructions regarding type of information required.) Transaction fee <i>(If travel outside of Texas, complete Schedule T)</i>	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Piryx, Inc.	Amount (\$)
3/8/2010	Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	4.50

Purpose of payment (See instructions regarding type of information required.) Transaction fee <i>(If travel outside of Texas, complete Schedule T)</i>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Piryx, Inc.	Amount (\$)
3/8/2010	Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	1.13

Purpose of payment (See instructions regarding type of information required.) Transaction fee <i>(If travel outside of Texas, complete Schedule T)</i>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Piryx, Inc.	Amount (\$)
3/8/2010	Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	4.50

Purpose of payment (See instructions regarding type of information required.) Transaction fee <i>(If travel outside of Texas, complete Schedule T)</i>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

<i>The Instruction Guide explains how to complete this form.</i>		1 Total pages Schedule F: 5 of 20
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)
4 Date 3/8/2010	5 Payee name Piryx, Inc. <hr/> 6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	7 Amount (\$) 1.13
8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 3/9/2010	Payee name Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 4.50
Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 3/11/2010	Payee name Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 1.13
Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 3/11/2010	Payee name Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 4.50
Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: 6 of 20
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)
4 Date 3/12/2010	5 Payee name Piryx, Inc. <hr/> 6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	7 Amount (\$) 11.25
8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 3/16/2010	Payee name Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 4.50
Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 3/24/2010	Payee name Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 6.75
Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 3/29/2010	Payee name Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	Amount (\$) 11.25
Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
7 of 20

2 FILER NAME: John Lipscombe 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
6/10/2010	Piryx, Inc. <hr/> 6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	2.25

8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
6/15/2010	Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	1.13

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
6/20/2010	Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	1.13

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
6/21/2010	Piryx, Inc. <hr/> Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	11.25

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	1 Total pages Schedule F: 8 of 20
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2 FILER NAME John Lipscombe	3 ACCOUNT # (Ethics Commission filers)
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4 Date	5 Payee name	7 Amount (\$)
6/21/2010	Piryx, Inc.	
	6 Payee address; City; State; Zip Code	4.50
	401 W 15th Street Suite 520	
	Austin, TX 78701	

8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
6/22/2010	Piryx, Inc.	
	Payee address; City; State; Zip Code	11.25
	401 W 15th Street Suite 520	
	Austin, TX 78701	

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
6/22/2010	Piryx, Inc.	
	Payee address; City; State; Zip Code	1.13
	401 W 15th Street Suite 520	
	Austin, TX 78701	

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
6/22/2010	Piryx, Inc.	
	Payee address; City; State; Zip Code	11.25
	401 W 15th Street Suite 520	
	Austin, TX 78701	

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES	SCHEDULE F
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule F. 9 of 20
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2 FILER NAME John Lipscombe	3 ACCOUNT # (Ethics Commission filers)
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4 Date	5 Payee name Piryx, Inc.	7 Amount (\$)
6/22/2010	6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	1.58

8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Piryx, Inc.	Amount (\$)
6/22/2010	Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	11.25

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Piryx, Inc.	Amount (\$)
6/23/2010	Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	2.25

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Piryx, Inc.	Amount (\$)
6/23/2010	Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	2.25

Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
10 of 20

2 FILER NAME
John Lipscombe 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
6/30/2010	Piryx, Inc. 6 Payee address; City; State; Zip Code 401 W 15th Street Suite 520 Austin, TX 78701	11.25

8 Purpose of payment (See instructions regarding type of information required.) Transaction fee (If travel outside of Texas, complete Schedule T)	9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
3/7/2010	Blue Roots Strategies, Inc Payee address; City; State; Zip Code P.O. Box Box 300053 Austin, TX 78703	655.36

Purpose of payment (See instructions regarding type of information required.) Auto call (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
3/1/2010	Blue Roots Strategies, Inc Payee address; City; State; Zip Code P.O. Box Box 300053 Austin, TX 78703	1235.92

Purpose of payment (See instructions regarding type of information required.) Auto calls (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
3/19/2010	RYLO Consulting, LLC Payee address; City; State; Zip Code 908 E 5th St, Suite 201 Austin, TX 78702	2303.95

Purpose of payment (See instructions regarding type of information required.) March fundraising/mailing (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES		SCHEDULE F
The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: 11 of 20
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Payee name Worley Printing Co., Inc	7 Amount (\$)
3/31/2010	6 Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722	2299.24
8 Purpose of payment (See instructions regarding type of information required.) Printing/Materials (If travel outside of Texas, complete Schedule T)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date	Payee name Blue Roots Strategies, Inc	Amount (\$)
4/20/2010	Payee address; City; State; Zip Code P.O. Box Box 300053 Austin, TX 78703	680.36
Purpose of payment (See instructions regarding type of information required.) Auto Calls (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date	Payee name Austin Pizza	Amount (\$)
3/2/2010	Payee address; City; State; Zip Code 1817 South Lamar Boulevard Austin, TX 78704	67.62
Purpose of payment (See instructions regarding type of information required.) Election day lunch for volunteers (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date	Payee name GNI Strategies	Amount (\$)
6/23/2010	Payee address; City; State; Zip Code 908 E. 5th St Ste 114 Austin, TX 78702	5000.00
Purpose of payment (See instructions regarding type of information required.) campaign bonus (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES		SCHEDULE F
The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: 12 of 20
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)
4 Date 2/26/2010	5 Payee name Rindy Miller Media 6 Payee address; City; State; Zip Code 2401 E. 6th Street Ste 1003 Austin, TX 78702	7 Amount (\$) 5000.00
8 Purpose of payment (See instructions regarding type of information required.) Media buy (If travel outside of Texas, complete Schedule T)		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 3/1/2010	Payee name Austin Pizza Payee address; City; State; Zip Code 1817 South Lamar Boulevard Austin, TX 78704	Amount (\$) 51.94
Purpose of payment (See instructions regarding type of information required.) food for volunteers (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 2/24/2010	Payee name People Calling People Payee address; City; State; Zip Code 6205 Coit Road, Suite 336 Plano, TX 75024	Amount (\$) 1192.38
Purpose of payment (See instructions regarding type of information required.) Auto-call (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 2/23/2010	Payee name iGnite Consulting Payee address; City; State; Zip Code 4032 S. Lamar Ste 500 Austin, TX 78704	Amount (\$) 7278.44
Purpose of payment (See instructions regarding type of information required.) Direct mail (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
13 of 20

2 FILER NAME **John Lipscombe** 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
3/31/2010	Charles Baker	350.00
	6 Payee address; City; State; Zip Code 3107 E 13th Austin, TX 78702	

8 Purpose of payment (See instructions regarding type of information required.) GoTV/E-day (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
3/31/2010	Sarah Bryant	250.00
	Payee address; City; State; Zip Code 2121 Dickson Dr Apt 223 Austin, TX 78704	

Purpose of payment (See instructions regarding type of information required.) GoTV/E-day (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/28/2010	Sarah Bryant	150.00
	Payee address; City; State; Zip Code 2121 Dickson Dr Apt 223 Austin, TX 78704	

Purpose of payment (See instructions regarding type of information required.) Feb 23-Field Staff (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/28/2010	Samuel Bean	200.00
	Payee address; City; State; Zip Code 2604 Paramount Ave Austin, TX 78704	

Purpose of payment (See instructions regarding type of information required.) Feb 23-Field Staff (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
14 of 20

2 FILER NAME 3 ACCOUNT # (Ethics Commission filers)
John Lipscombe

4 Date	5 Payee name Tsoke "Chuck" Adjavon	7 Amount (\$)
2/28/2010	6 Payee address; City; State; Zip Code 916 Rochester Castle Way Pflugerville, TX 78660	225.00

8 Purpose of payment (See instructions regarding type of information required.) Feb 23-Field Staff (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Ariel Coleman	Amount (\$)
2/23/2010	Payee address; City; State; Zip Code 2808 Skyway Circle Apt 102 Austin, TX 78704	300.00

Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Amy Smith	Amount (\$)
2/23/2010	Payee address; City; State; Zip Code 4405 Ave A # 25 Austin, TX 78751	150.00

Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name James Finlay	Amount (\$)
2/23/2010	Payee address; City; State; Zip Code 5007 A Cottonwood Cir Austin, TX 78723	200.00

Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	1 Total pages Schedule F: 15 of 20
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2 FILER NAME John Lipscombe	3 ACCOUNT # (Ethics Commission filers)
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4 Date 2/23/2010	5 Payee name Tsoke "Chuck" Adjavon 6 Payee address; City; State; Zip Code 916 Rochester Castle Way Pflugerville, TX 78660	7 Amount (\$) 150.00
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8 Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/23/2010	Payee name Samuel Bean Payee address; City; State; Zip Code 2604 Paramount Ave Austin, TX 78704	Amount (\$) 150.00
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Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/23/2010	Payee name Sarah Bryant Payee address; City; State; Zip Code 2121 Dickson Dr Apt 223 Austin, TX 78704	Amount (\$) 150.00
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Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/23/2010	Payee name Micah King Payee address; City; State; Zip Code 1512 Pennsylvania Ave # A Austin, TX 78702	Amount (\$) 150.00
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Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
16 of 20

2 FILER NAME
John Lipscombe 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
2/23/2010	Charles Baker	150.00
	6 Payee address; City; State; Zip Code 3107 E 13th Austin, TX 78702	

8 Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/23/2010	Andy Janway	75.00
	Payee address; City; State; Zip Code 3107 E 13th St Austin, TX 78702	

Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/28/2010	Charles Baker	100.00
	Payee address; City; State; Zip Code 3107 E 13th Austin, TX 78702	

Purpose of payment (See instructions regarding type of information required.) Feb 23-Field Staff (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/28/2010	James Finlay	275.00
	Payee address; City; State; Zip Code 5007 A Cottonwood Cir Austin, TX 78723	

Purpose of payment (See instructions regarding type of information required.) Feb 23-Field Staff (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F:
17 of 20

2 FILER NAME
John Lipscombe 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
2/28/2010	Ariel Coleman	225.00
	6 Payee address; City; State; Zip Code 2808 Skyway Circle Apt 102 Austin, TX 78704	

8 Purpose of payment (See instructions regarding type of information required.) Feb 23-Field Staff (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/28/2010	Amy Smith	150.00
	Payee address; City; State; Zip Code 4405 Ave A # 25 Austin, TX 78751	

Purpose of payment (See instructions regarding type of information required.) Feb 23-Field Staff (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
3/4/2010	Erica Pincus	14.27
	Payee address; City; State; Zip Code 908 E. 5th St Ste 202 Austin, TX 78702	

Purpose of payment (See instructions regarding type of information required.) Reimbursement: Randalls shopping (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/25/2010	Ariel Coleman	38.96
	Payee address; City; State; Zip Code 2808 Skyway Circle Apt 102 Austin, TX 78704	

Purpose of payment (See instructions regarding type of information required.) Re-imbursement for ink (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES **SCHEDULE F**

The Instruction Guide explains how to complete this form. **1** Total pages Schedule F:
18 of 20

2 FILER NAME
John Lipscombe **3** ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
3/4/2010	Elizabeth Proehl	1000.00
	6 Payee address; City; State; Zip Code 2808 Skyway Circle #102 Austin, TX 78704	

8 Purpose of payment (See instructions regarding type of information required.) Field Director/Outreach bonus (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
2/28/2010	Jesse Atkins	225.00
	Payee address; City; State; Zip Code 1914 Patton Ln Austin, TX 78723	

Purpose of payment (See instructions regarding type of information required.) Field staff (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
3/2/2010	William Jones	75.00
	Payee address; City; State; Zip Code 2401 S lake Shore Blvd 12-107 Austin, TX 78741	

Purpose of payment (See instructions regarding type of information required.) Field staff (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
3/2/2010	Ariel Coleman	34.89
	Payee address; City; State; Zip Code 2808 Skyway Circle Apt 102 Austin, TX 78704	

Purpose of payment (See instructions regarding type of information required.) Re-imburement: E-day supplies (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:
19 of 20

2 FILER NAME
John Lipscombe

3 ACCOUNT # (Ethics Commission filers)

4 Date 5/24/2010	5 Payee name Eleanor Thompson	7 Amount (\$) 500.00
6 Payee address; City; State; Zip Code 3313 Pecan Springs Austin, TX 78723		

8 Purpose of payment (See instructions regarding type of information required.) March services (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 5/24/2010	Payee name GNI Strategies	Amount (\$) 1700.00
Payee address; City; State; Zip Code 908 E. 5th St Ste 114 Austin, TX 78702		

Purpose of payment (See instructions regarding type of information required.) March services (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 6/21/2010	Payee name GNI Strategies	Amount (\$) 750.00
Payee address; City; State; Zip Code 908 E. 5th St Ste 114 Austin, TX 78702		

Purpose of payment (See instructions regarding type of information required.) June-consulting (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 2/27/2010	Payee name Paul Chambless	Amount (\$) 250.00
Payee address; City; State; Zip Code 16900 Fgerquist Rd Del Valle, TX 78617		

Purpose of payment (See instructions regarding type of information required.) 4x8 sign distribution (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: 20 of 20
2 FILER NAME John Lipscombe		3 ACCOUNT # (Ethics Commission filers)
4 Date 2/22/2010	5 Payee name Rindy Miller Media ----- 6 Payee address; City; State; Zip Code 2401 E. 6th Street Ste 1003 Austin, TX 78702	7 Amount (\$) 5000.00
8 Purpose of payment (See instructions regarding type of information required.) Media buy (If travel outside of Texas, complete Schedule T)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 5/24/2010	Payee name Stephanie Benold ----- Payee address; City; State; Zip Code 2805 Horseshoe Bend Cv Austin, TX 78704	Amount (\$) 750.00
Purpose of payment (See instructions regarding type of information required.) campaign service (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 6/21/2010	Payee name Stephanie Benold ----- Payee address; City; State; Zip Code 2805 Horseshoe Bend Cv Austin, TX 78704	Amount (\$) 750.00
Purpose of payment (See instructions regarding type of information required.) Win bonus (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 2/23/2010	Payee name William Jones ----- Payee address; City; State; Zip Code 2401 S lake Shore Blvd 12-107 Austin, TX 78741	Amount (\$) 150.00
Purpose of payment (See instructions regarding type of information required.) Field Staff-Feb 16 (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

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