

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

7433

1 ACCOUNT #	00007063	2 PAGE #	1 of 40
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3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Brandy	MI	OFFICE USE ONLY
	NICKNAME	LAST Mueller	SUFFIX	

4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Legal Date Processed Date Imaged
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report		

5 ORIGINAL PERIOD COVERED	Month Day Year	Month Day Year
	07/01/2009	THROUGH 12/31/2009

6 EXPLANATION OF CORRECTION
 Report as originally filed inadvertently omitted Schedule L, documenting outstanding loans previously reported on Schedule E of report filed on July 15, 2009.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

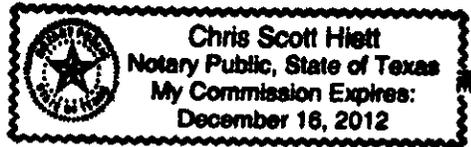
Check ONLY if applicable:

I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Brandy Mueller this the 30 day of July, 2010, to certify which, witness my hand and seal of office.

Chris Hiatt Chris Hiatt Notary Public
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath



Brandy Mueller
 Signature of Candidate or Officeholder

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

14 C/OH NAME Mueller, Brandy (Ms.)

15 ACCOUNT # (Ethics Commission filers)
00007063

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

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

additional pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 535.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,795.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 127.75
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4. TOTAL POLITICAL EXPENDITURES	\$ 25,562.22
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CONTRIBUTION BALANCE

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

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

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

Brandy Mueller

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 1/21 Report: 4/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

07/25/2009

5 Full name of contributor out-of-state PAC (ID# _____)
Ausley, Robbie

6 Contributor address; City; State; Zip Code
3707 Laurel Ledge Ln
Austin, TX 78731

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
Retired

10 Contributor's job title
Retired

11 Contributor's employer / law firm
None

12 Law firm of contributor's spouse (if any)
Ausley Algert Robertson & Flores LLP

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

Date

07/22/2009

Full name of contributor out-of-state PAC (ID# _____)
Avery, John Sr.

Contributor address; City; State; Zip Code
400 E Main St
Round Rock, TX 78664

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Principal

Contributor's employer / law firm
Law Offices of John Avery

Law firm of contributor's spouse (if any)

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

Date

12/10/2009

Full name of contributor out-of-state PAC (ID# _____)
Bennett, Kevin

Contributor address; City; State; Zip Code
1701 Jackson Hole Cv
Austin, TX 78746

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Principal

Contributor's employer / law firm
Law Office of Kevin Bennett

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 3/21 Report: 6/40	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 07/31/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Leslie 6 Contributor address; City; State; Zip Code 700 Lavaca St Ste 405 Austin, TX 78701	7 Amount of contribution (\$) \$35.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Principal	
11 Contributor's employer / law firm Law Office Of Leslie J. Boykin		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 10/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Leslie Contributor address; City; State; Zip Code 700 Lavaca St Ste 405 Austin, TX 78701	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Principal	
Contributor's employer / law firm Law Office Of Leslie J. Boykin		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 10/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brow, Geoffrey Contributor address; City; State; Zip Code One Dell Way MS RR1-33 Austin, TX 78682	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm Dell Inc.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #
Schedule: 4/21 Report: 7/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00007063

4 Date 07/08/2009
5 Full name of contributor out-of-state PAC (ID# _____)
Bryan, Frank

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

6 Contributor address; City; State; Zip Code
610 Brazos St Ste 660
Austin, TX 78701

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Attorney

10 Contributor's job title
Solo Practitioner

11 Contributor's employer / law firm
Self-Employed

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

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

Date 07/20/2009
Full name of contributor out-of-state PAC (ID# _____)
Burgess, Linda

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

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

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Member

Contributor's employer / law firm
Winstead PC

Law firm of contributor's spouse (if any)

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

Date 09/04/2009
Full name of contributor out-of-state PAC (ID# _____)
Burke, Cecelia

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
Director

Contributor's job title
Director

Contributor's employer / law firm
Texas Association of Domestic Relations Offices

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/21 Report: 8/40	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 11/03/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Roy	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 2 Niles Rd Austin, TX 78703	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation Business Owner		10 Contributor's job title Owner	
11 Contributor's employer / law firm Capitol Beverage		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 09/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byrne, Daniel	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 98 San Jacinto Blvd Ste 2000 Austin, TX 78701	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Partner	
Contributor's employer / law firm Fritz Byrne Head & Harrison LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 07/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calamia Law Firm LLP	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 812 San Antonio St Ste 101 Austin, TX 78701	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation		Contributor's job title	
Contributor's employer / law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/21 Report: 9/40	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 09/17/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Callaway Cole, Jodi 6 Contributor address; City; State; Zip Code 609 W 9th St Austin, TX 78701	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Principal	
11 Contributor's employer / law firm The Law Firm of Jodi Callaway Cole		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 07/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cowan, Robert Contributor address; City; State; Zip Code 1301 W 38th St Ste 109 Austin, TX 78705	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor's principal occupation Physician		Contributor's job title Doctor	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 08/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crockett, Moton Jr. Contributor address; City; State; Zip Code PO Box 2066 Austin, TX 78768	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation Investor		Contributor's job title Investor	
Contributor's employer / law firm M.H. Crockett Properties Inc.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/21 Report: 10/40	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 09/09/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowley, Beryl	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code PO Box 12487 Austin, TX 78711	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation Attorney		10 Contributor's job title Sole Practitioner	
11 Contributor's employer / law firm Beryl P. Crowley, Attorney & Counselor At Law		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 10/27/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cummings, Patricia	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 405 Round Rock Ave Round Rock, TX 78664	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 12/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) De la Rosa, Ronnie	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1106 San Antonio St Austin, TX 78701	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Principal	
Contributor's employer / law firm Law Office of Ron De La Rosa		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/21 Report: 11/40	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 07/07/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dow, Jason 6 Contributor address; City; State; Zip Code 2901 Bee Cave Rd Box C Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Sole Practitioner	
11 Contributor's employer / law firm Self-Employed		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 07/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dowling, Larry Contributor address; City; State; Zip Code 1602 E 7th St Austin, TX 78702	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 08/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Draper, Charles Contributor address; City; State; Zip Code 4609 Trail Crest Cir Austin, TX 78735	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation information technology		Contributor's job title Owner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/21 Report: 12/40	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 12/18/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Draper, Charles	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 4609 Trail Crest Cir Austin, TX 78735	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Contributor's principal occupation information technology		10 Contributor's job title Owner	
11 Contributor's employer / law firm Self-Employed		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 07/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellwanger, Jay	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 11326 Alhambra Dr Austin, TX 78759	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Attorney		Contributor's job title Partner	
Contributor's employer / law firm DiNovo Price & Ellwanger LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 07/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Falkenberg, Howard	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code PO Box 1466 Austin, TX 78767	(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Contributor's principal occupation Public Relations		Contributor's job title President	
Contributor's employer / law firm Staats Falkenberg & Partners		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 10/21 Report: 13/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

12/11/2009

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

Fredericks, Carol PhD

6 Contributor address: City; State; Zip Code

305 E 32nd St
Austin, TX 78705

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Retired

10 Contributor's job title
Retired

11 Contributor's employer / law firm
Retired

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

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

Date

07/15/2009

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

Gardner, Doug

Contributor address: City; State; Zip Code

5905 Maury's Trl
Austin, TX 78730

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Assistant United States Attorney

Contributor's employer / law firm
US Attorney's Office

Law firm of contributor's spouse (if any)

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

Date

07/31/2009

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

Grant, Charles Jr.

Contributor address: City; State; Zip Code

502 W 13th St
Austin, TX 78701

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Sole Practitioner

Contributor's employer / law firm
Self-Employed

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #
Schedule: 11/21 Report: 14/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00007063

4 Date 07/14/2009 **5** Full name of contributor out-of-state PAC (ID# _____)
Hernandez, Mack Ray

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

6 Contributor address; City; State; Zip Code
919 Congress Ave Ste 900
Austin, TX 78701

\$100.00

(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
Hernandez Simpson LLP

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

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

Date 07/13/2009 Full name of contributor out-of-state PAC (ID# _____)
Higley, Garrett

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

Contributor address; City; State; Zip Code
901 S Mopac Expwy Ste 200
Austin, TX 78746

\$500.00

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

Contributor's employer / law firm
The Higley Firm

Law firm of contributor's spouse (if any)

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

Date 12/18/2009 Full name of contributor out-of-state PAC (ID# _____)
Hildreth, Albert

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

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

\$250.00

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Sole Practitioner

Contributor's employer / law firm
Duke Hildreth Attorney at Law

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 12/21 Report: 15/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

12/01/2009

5 Full name of contributor out-of-state PAC (ID# _____)
Hunt, Russell Jr.

6 Contributor address; City; State; Zip Code
811 Nueces St
Austin, TX 78701

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Attorney

10 Contributor's job title
Sole Practitioner

11 Contributor's employer / law firm
Law Offices of Russ Hunt

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

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

Date

07/21/2009

Full name of contributor out-of-state PAC (ID# _____)
Ihrke, Ann

Contributor address; City; State; Zip Code
1441 N 1800 East Rd
Buckley, IL 60918

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(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

11/23/2009

Full name of contributor out-of-state PAC (ID# _____)
John Barkley Company

Contributor address; City; State; Zip Code
3117 Guadalupe
Austin, TX 78705

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Contributor's job title

Contributor's employer / law firm

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 13/21 Report: 16/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

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

Kitz, Stephanie

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

07/06/2009

6 Contributor address; City; State; Zip Code

17 Josephine St #1
Boston, MA 02122

\$125.00

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Administrative Education

10 Contributor's job title
Director

11 Contributor's employer / law firm
Boston Public School

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

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

Date

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

Lalk, Margaret

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/05/2009

Contributor address; City; State; Zip Code

PO Box 92212
Austin, TX 78709

\$100.00

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Principal

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

Law firm of contributor's spouse (if any)

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

Date

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

Lewis, Gibson

Amount of contribution (\$)

In-kind contribution description (if applicable)

09/14/2009

Contributor address; City; State; Zip Code

2300 Race St
Fort Worth, TX 76111

\$125.00

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Businessman

Contributor's job title
President

Contributor's employer / law firm
Lewis Label Products

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 14/21 Report: 17/40

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

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

11/05/2009

5 Full name of contributor out-of-state PAC (ID# _____)
Lowe, Claudette

6 Contributor address; City; State; Zip Code
400 Academy Dr
Austin, TX 78704

7 Amount of contribution (\$)

\$200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Real Estate Agent

10 Contributor's job title
Real Estate Agent

11 Contributor's employer / law firm
Moreland Realty

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

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

Date

07/30/2009

Full name of contributor out-of-state PAC (ID# _____)
Lowe, Kyle Jr

Contributor address; City; State; Zip Code
800 Rio Grande St
Austin, TX 78701

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Sole Practitioner

Contributor's employer / law firm
Self-Employed

Law firm of contributor's spouse (if any)

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

Date

12/18/2009

Full name of contributor out-of-state PAC (ID# _____)
Machado, Albert

Contributor address; City; State; Zip Code
607 W 9th St
Austin, TX 78701

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Sole Practitioner

Contributor's employer / law firm
Law Office of Albert Machado

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 15/21 Report: 18/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

11/05/2009

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

Madden, Margaret

6 Contributor address; City; State; Zip Code

4204 Gnarl Dr
Austin, TX 78731

7 Amount of
contribution (\$)

\$500.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Retired

10 Contributor's job title
Retired

11 Contributor's employer / law firm
Retired

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

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

Date

08/31/2009

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

Magnus, Simon

Contributor address; City; State; Zip Code
9442 N Capital of Texas Hwy Ste 600
Austin, TX 78759

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Realtor

Contributor's job title
Realtor

Contributor's employer / law firm
Coldwell Banker

Law firm of contributor's spouse (if any)

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

Date

10/16/2009

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

Malone, Patrick

Contributor address; City; State; Zip Code
8300 Puerta Vista
Austin, TX 78759

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Solo Practitioner

Contributor's employer / law firm
Law Office of Pat Malone

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 16/21 Report: 19/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00007063

4 Date 10/27/2009

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

7 Amount of contribution (\$) \$125.00

8 In-kind contribution description (if applicable)

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

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Attorney

10 Contributor's job title
Partner

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

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

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

Date 10/04/2009

Full name of contributor out-of-state PAC (ID# _____)
McGhee, Fred PhD

Amount of contribution (\$) \$60.00

In-kind contribution description (if applicable)

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

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Consulting

Contributor's job title
President

Contributor's employer / law firm
Fred L. McGhee & Associates

Law firm of contributor's spouse (if any)

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

Date 07/06/2009

Full name of contributor out-of-state PAC (ID# _____)
Montford & McNelis LLP

Amount of contribution (\$) \$125.00

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

Contributor's job title

Contributor's employer / law firm

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 17/21 Report: 20/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

08/03/2009

5 Full name of contributor out-of-state PAC (ID# _____)
Morales, Novert

6 Contributor address; City; State; Zip Code
1007 E 7th St
Austin, TX 78702

7 Amount of contribution (\$)

\$125.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Attorney

10 Contributor's job title
Partner

11 Contributor's employer / law firm
Morales & Navarrete LLP

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

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

Date

09/09/2009

Full name of contributor out-of-state PAC (ID# _____)
Mueller, Joshua

Contributor address; City; State; Zip Code
3911 229th Pl SE
Sammamish, WA 98075

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
None

Contributor's job title
None

Contributor's employer / law firm
None

Law firm of contributor's spouse (if any)

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

Date

08/20/2009

Full name of contributor out-of-state PAC (ID# _____)
Niland, Nona MD

Contributor address; City; State; Zip Code
324 Eanes School Rd
Austin, TX 78746

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Community Volunteer

Contributor's job title
None

Contributor's employer / law firm
None

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 18/21 Report: 21/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

07/01/2009

5 Full name of contributor out-of-state PAC (ID# _____)
Peek, Jeffrey

6 Contributor address; City; State; Zip Code
1214 E 7th St
Austin, TX 78702

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

(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
Evans & Peek

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

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

Date

08/14/2009

Full name of contributor out-of-state PAC (ID# _____)
Rapoport, Bernard

Contributor address; City; State; Zip Code
PO Box 21900
Waco, TX 76702

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(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

10/14/2009

Full name of contributor out-of-state PAC (ID# _____)
Reaud, Reagan

Contributor address; City; State; Zip Code
3411 Chestnut St Apt 335
Philadelphia, PA 19104

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney

Contributor's job title
Sole Practitioner

Contributor's employer / law firm
Self-Employed/Graduate Student

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 19/21 Report: 22/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

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

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

\$100.00

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

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Attorney

10 Contributor's job title
Principal

11 Contributor's employer / law firm
Rentea & Associates

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

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

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

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$100.00

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

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Marketing

Contributor's job title
Account Executive

Contributor's employer / law firm
KUT Radio

Law firm of contributor's spouse (if any)

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

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

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$250.00

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

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Contributor's job title

Contributor's employer / law firm

Law firm of contributor's spouse (if any)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/21 Report: 23/40	
2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00007063	
4 Date 08/14/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepherd, Robb 6 Contributor address; City; State; Zip Code PO Box 2526 Austin, TX 78768	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title Sole Practitioner	
11 Contributor's employer / law firm 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 12/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sheppard, David Contributor address; City; State; Zip Code 7135 Valburn Austin, TX 78731	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 07/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Slavik, Ladis Jr. Contributor address; City; State; Zip Code 605 W Oltorf St Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Sole Practitioner	
Contributor's employer / law firm Self-Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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

1 PAGE #

Schedule: 21/21 Report: 24/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00007063

4 Date

07/31/2009

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

Sumpter & Gonzalez LLP

6 Contributor address; City; State; Zip Code

209 E 9th St Ste 1511
Austin, TX 78701

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

10 Contributor's job title

11 Contributor's employer / law firm

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

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

Date

09/10/2009

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

Valdes, Alejandro

Contributor address; City; State; Zip Code

401 Congress Ave Ste 2100
Austin, TX 78701

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Attorney

Contributor's job title

Associate

Contributor's employer / law firm

Winstead PC

Law firm of contributor's spouse (if any)

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

PLEGGED CONTRIBUTIONS (JUDICIAL)**SCHEDULE B (J)**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 26/40

2 FILER NAME Mueller, Brandy (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00007063

4 TOTAL OF UNITEMIZED PLEDGES:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

50.00

5 Date

10/07/2009

6 Full name of pledgor

Flores, Hermes

 out-of-state PAC (ID# _____)**7** Pledgor address; City; State; Zip Code812 San Antonio St Ste 118
Austin, TX 78701**8** Amount of
pledge (\$)

\$125.00

9 In-kind description
(if applicable)(If travel outside of Texas, complete Schedule T) **10** Pledgor's principal occupation
Attorney**11** Pledgor's job title
Principal**12** Pledgor's employer / law firm
Hermes E. Flores Law Firm PLLC**13** Law firm of pledgor's spouse (if any)**14** If pledgor is a child, law firm of parent(s) (if any)

Date

08/21/2009

Full name of pledgor

Taylor, Joe

 out-of-state PAC (ID# _____)

Pledgor address; City; State; Zip Code

PO Box 1521
Austin, TX 78767Amount of
pledge (\$)

\$200.00

In-kind description
(if applicable)(If travel outside of Texas, complete Schedule T) Pledgor's principal occupation
AttorneyPledgor's job title
Sole PractitionerPledgor's employer / law firm
Self-Employed

Law firm of pledgor's spouse (if any)

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/12 Report: 27/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 08/30/2009	5 Payee name AFL-CIO
6 Amount (\$) \$215.00	7 Payee address City: State: Zip Code 1106 Lavaca St Austin, TX 78701

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Program Advertisement
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/01/2009	Payee name AFSCME Local 1624
Amount (\$) \$100.00	Payee address City: State: Zip Code 7901 Cameron Rd #2-300 Austin, TX 78754

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Program Advertisement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/21/2009	Payee name Becky Kittleman Photography
Amount (\$) \$292.28	Payee address City: State: Zip Code 404 Inwood Road Austin, TX 78746

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/01/2009	Payee name Butts, David
Amount (\$) \$800.00	Payee address City: State: Zip Code 1914 Patton Ln Austin, TX 78723

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/12 Report: 28/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 07/29/2009	5 Payee name Butts, David
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6 Amount (\$) \$800.00	7 Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
---------------------------------	--	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/01/2009	Payee name Butts, David
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Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
-------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/30/2009	Payee name Butts, David
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Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2009	Payee name Butts, David
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Amount (\$) \$800.00	Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
-------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/12 Report: 29/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
---	--	---

4 Date 12/01/2009	5 Payee name Butts, David
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6 Amount (\$) \$800.00	7 Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/09/2009	Payee name Capital Area Democratic Women
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Amount (\$) \$100.00	Payee address City; State; Zip Code 1501 E 6th St Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Program Advertisement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/27/2009	Payee name Fedex Kinko's
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Amount (\$) \$140.68	Payee address City; State; Zip Code 2901C Medical Arts Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Copies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/28/2009	Payee name Fedex Kinko's
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Amount (\$) \$15.97	Payee address City; State; Zip Code 2901C Medical Arts Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/12 Report: 30/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 10/18/2009	5 Payee name Fedex Kinko's
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6 Amount (\$) \$279.00	7 Payee address City; State; Zip Code 2901C Medical Arts Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing Invites
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/29/2009	Payee name GNI Strategies LLC
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Amount (\$) \$750.00	Payee address City; State; Zip Code 908 E. 5th St. #114 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/30/2009	Payee name GNI Strategies LLC
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Amount (\$) \$750.00	Payee address City; State; Zip Code 908 E. 5th St. #114 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/30/2009	Payee name GNI Strategies LLC
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Amount (\$) \$750.00	Payee address City; State; Zip Code 908 E. 5th St #114 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/12 Report: 31/40		2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (TEC filers) 00007063	
4 Date 10/29/2009	5 Payee name GNI Strategies LLC				
6 Amount (\$) \$750.00	7 Payee address City; State; Zip Code 908 E 5th St #114 Austin, TX 78702				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
			Consulting		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 11/25/2009	Payee name GNI Strategies LLC				
Amount (\$) \$750.00	Payee address City; State; Zip Code 908 E 5th St #114 Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
			Consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/24/2009	Payee name Harden, Ada				
Amount (\$) \$400.00	Payee address City; State; Zip Code 1700 Meander Dr Austin, TX 78721				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
			Consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 11/16/2009	Payee name Harden, Ada				
Amount (\$) \$400.00	Payee address City; State; Zip Code 1700 Meander Dr Austin, TX 78721				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
			Consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 6/12 Report: 32/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 12/01/2009	5 Payee name Harden, Ada
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6 Amount (\$) \$400.00	7 Payee address City; State; Zip Code 1700 Meander Dr Austin, TX 78721
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/18/2009	Payee name Juan in a Million
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Amount (\$) \$139.00	Payee address City; State; Zip Code 2300 E Cesar Chavez St Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Event Costs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/18/2009	Payee name Juan in a Million
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Amount (\$) \$698.87	Payee address City; State; Zip Code 2300 E Cesar Chavez St Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Event Costs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/09/2009	Payee name La Prensa Newspaper
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Amount (\$) \$200.00	Payee address City; State; Zip Code 1704 E 14th St Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertisement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/12 Report: 33/40		2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (TEC filers) 00007063	
4 Date 11/16/2009		5 Payee name National Association for the Advancement of Colored People (NAACP)			
6 Amount (\$) \$130.00		7 Payee address City; State; Zip Code 1704 E 12th St Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Two Event Tickets (Reimbursed Ada Harden)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/01/2009		Payee name National Association for the Advancement of Colored People (NAACP)			
Amount (\$) \$65.00		Payee address City; State; Zip Code 1704 E 12th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> One Event Ticket (Reimbursed Ada Harden)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/20/2009		Payee name Paddington Web Design			
Amount (\$) \$550.00		Payee address City; State; Zip Code 504 West 7th St, Suite B Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/08/2009		Payee name Paddington Web Design			
Amount (\$) \$300.00		Payee address City; State; Zip Code 504 West 7th Street Suite B Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/12 Report: 34/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 07/29/2009	5 Payee name Ranes, Jim
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6 Amount (\$) \$180.00	7 Payee address City; State; Zip Code 1501 Barton Springs Rd #233 Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Invitation design, layout, ect.
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/20/2009	Payee name Ranes, Jim
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Amount (\$) \$124.95	Payee address City; State; Zip Code 1501 Barton Springs Rd #233 Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Invitation design, layout, ect.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/12/2009	Payee name Ranes, Jim
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Amount (\$) \$184.95	Payee address City; State; Zip Code 1501 Barton Springs Rd #233 Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Invitation design, layout, ect.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/21/2009	Payee name Scholz Garden
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Amount (\$) \$378.88	Payee address City; State; Zip Code 1607 San Jacinto Blvd Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Deposit for Planned Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/12 Report: 35/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 07/10/2009	5 Payee name Stanley-Garrison & Associates
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6 Amount (\$) \$239.73	7 Payee address City; State; Zip Code 812 San Antonio, Suite G23 Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Expenses (postage, printing, phones ect.)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/10/2009	Payee name Stanley-Garrison & Associates
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Amount (\$) \$3,926.00	Payee address City; State; Zip Code 812 San Antonio, Suite G23 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/09/2009	Payee name Stanley-Garrison & Associates
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Amount (\$) \$819.00	Payee address City; State; Zip Code 812 San Antonio, Suite G23 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Consulting & Expenses (postage, printing, phones ect.)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/09/2009	Payee name Stanley-Garrison & Associates
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Amount (\$) \$289.50	Payee address City; State; Zip Code 812 San Antonio, Suite G23 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Consulting & Expenses (postage, printing, phones ect.)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/12 Report: 36/40		2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (TEC filers) 00007063	
4 Date 09/09/2009	5 Payee name Stanley-Garrison & Associates				
6 Amount (\$) \$117.33	7 Payee address City; State; Zip Code 812 San Antonio, Suite G23 Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Consulting & Expenses (postage, printing, phones ect.)		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/15/2009	Payee name Stanley-Garrison & Associates				
Amount (\$) \$315.03	Payee address City; State; Zip Code 812 San Antonio Ste G23 Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Consulting & Expenses (postage, printing, phones ect.)		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 12/01/2009	Payee name Stanley-Garrison & Associates				
Amount (\$) \$407.18	Payee address City; State; Zip Code 812 San Antonio Ste G23 Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Consulting & Expenses (postage, printing, phones ect.)		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 12/03/2009	Payee name Travis County Democratic Party				
Amount (\$) \$1,500.00	Payee address City; State; Zip Code 1311 E 6th St Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Filing Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/12 Report: 37/40		2 FILER NAME Mueller, Brandy (Ms.)		3 ACCOUNT # (TEC filers) 00007063	
4 Date 10/19/2009		5 Payee name United States Post Office			
6 Amount (\$) \$8.68		7 Payee address City; State; Zip Code 4300 Speedway Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/19/2009		Payee name United States Post Office			
Amount (\$) \$56.00		Payee address City; State; Zip Code 4300 Speedway Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/25/2009		Payee name Worley Printing Company Inc			
Amount (\$) \$1,007.81		Payee address City; State; Zip Code 3217 N IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/25/2009		Payee name Worley Printing Company Inc			
Amount (\$) \$411.35		Payee address City; State; Zip Code 3217 N IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/12 Report: 38/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 09/24/2009	5 Payee name Worley Printing Company Inc
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6 Amount (\$) \$1,638.91	7 Payee address City; State; Zip Code 3217 N IH 35 Austin, TX 78722
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/10/2009	Payee name Worley Printing Company Inc
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Amount (\$) \$337.74	Payee address City; State; Zip Code 3217 N IH 35 Austin, TX 78722
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 39/40	2 FILER NAME Mueller, Brandy (Ms.)	3 ACCOUNT # (TEC filers) 00007063
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4 Date 10/29/2009	5 Payee name Central Market
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6 Amount (\$) \$95.34 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 4001 N Lamar Blvd Austin, TX 78756
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Beverages for Fundraiser
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Date 10/03/2009	Payee name Randalls
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Amount (\$) \$4.29 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1500 W 35th St Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Balloons for Volunteer Event
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Date 10/03/2009	Payee name Taco Shack
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Amount (\$) \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 4002 N Lamar Austin, TX 78756
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Volunteer Event
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Date 12/09/2009	Payee name US Postal Service
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Amount (\$) \$266.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3201 Bee Caves Rd Ste 120 Austin, TX 78746
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage
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OUTSTANDING LOANS

SCHEDULE L

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

1 PAGE #
Schedule: 1/1 Report: 40/40

2 FILER NAME Mueller, Brandy (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00007063

LENDER INFORMATION

4 Name of lender
Mueller, Brandy (Ms.)

5 Lender address; City; State; Zip Code
605 W 10th St
Austin, TX 78701

GUARANTOR INFORMATION

6 Name of guarantor

7 Guarantor address; City; State; Zip Code

not applicable