

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7441

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

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

1 ACCOUNT #
(Ethics Commission filers)
00007207

2 PAGE #
1 of 21

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Mr. Mike
NICKNAME LAST SUFFIX
McNamara

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3501 Carla Drive
Austin, TX 78754

Change of Address

Date Hand-delivered or Date Postmarked

Receipt # Amount

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mrs. Julia
NICKNAME LAST SUFFIX
McNamara

Date Processed

Date Imaged

6 CAMPAIGN TREASURER ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
3501 Carla Drive
Austin, TX 78754

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 926-1186

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
07/01/2010 09/23/2010

10 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE
11/02/2010 Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)
Travis County Judge

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME **McNamara, Mike (Mr.)**

15 ACCOUNT # (Ethics Commission filers)
00007207

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

<input type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		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 **\$ 0.00**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 7,430.00**

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED **\$ 0.00**

4. TOTAL POLITICAL EXPENDITURES **\$ 4,312.00**

CONTRIBUTION BALANCE

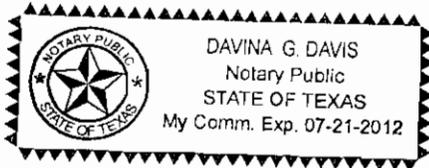
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 7,799.78**

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 0.00**

18 AFFIDAVIT

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



J. Mike McNamara
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said J. Mike McNamara, this the 4th day of October, 2010, to certify which, witness my hand and seal of office.

Davina G. Davis
Signature of officer administering oath

Davina G. Davis
Print name of officer administering oath

Personal Banking Officer
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 1/10 Report: 3/21

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00007207

4 Date
08/12/2010

5 Full name of contributor out-of-state PAC (ID# _____)
Abitua, Angel (Mr.)

6 Contributor address; City; State; Zip Code
2418 Mockingbird Drive
Round Rock, TX 78681

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

\$50.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
HUB Program Coordinator

10 Employer (See Instructions)
Texas General Land Office

Date
08/03/2010

Full name of contributor out-of-state PAC (ID# _____)
Anderson, Joe (Mr.)

Contributor address; City; State; Zip Code
1707 Stamford Lane
Austin, TX 78703

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

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self

Date
08/23/2010

Full name of contributor out-of-state PAC (ID# _____)
Anderton, Beth (Ms.)

Contributor address; City; State; Zip Code
7213 Mitra Drive
Austin, TX 78739

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

\$10.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Best efforts

Employer (See Instructions)
Best efforts

Date
08/19/2010

Full name of contributor out-of-state PAC (ID# _____)
Austin Republican Women Club PAC

Contributor address; City; State; Zip Code
5302 S. Scout Island Circle
Austin, TX 78731

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

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
PAC

Employer (See Instructions)
PAC

Date
08/12/2010

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

Contributor address; City; State; Zip Code
6608 Delmonico Drive
Austin, TX 78759-6162

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

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Director of Regulatory Affairs

Employer (See Instructions)
Verizon

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 2/10 Report: 4/21

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00007207

4 Date
08/22/2010

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

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

\$25.00

6 Contributor address; City; State; Zip Code
2110 Arpdale Street
Austin, TX 78704

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
Retired

Date
08/23/2010

Full name of contributor out-of-state PAC (ID# _____)
Blackard, Robert (Mr.)

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

\$100.00

Contributor address; City; State; Zip Code
10500 Grand Oak Circle
Austin, TX 78750

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
IT Consultant

Employer (See Instructions)
Allied Consultants, Inc.

Date
08/19/2010

Full name of contributor out-of-state PAC (ID# _____)
Borgeft, Roger (Mr.)

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

\$100.00

Contributor address; City; State; Zip Code
106 Laurel Lane
Austin, TX 78705

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self

Date
08/02/2010

Full name of contributor out-of-state PAC (ID# _____)
Bradberry, Timothy (Mr.)

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

\$250.00

Contributor address; City; State; Zip Code
17903 Worley Drive
Pflugerville, TX 78660

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Professional Engineer

Employer (See Instructions)
Texas Dept of Transportation

Date
09/08/2010

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

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

\$100.00

Contributor address; City; State; Zip Code
5443 Butler Hill Estates Drive
Saint Louis, MO 63128-3723

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Agincourt Ventures

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/10 Report: 5/21	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date 08/12/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bsaibes, Mounir 6 Contributor address; City; State; Zip Code 8212 Slate Creed Trail Austin, TX 78717	7 Amount of contribution (\$) \$75.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Software Engineer		10 Employer (See Instructions) IBM	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/01/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Casiraghi, Jane (Mrs.) Contributor address; City; State; Zip Code 4403 Osby Houston, TX 77096	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/15/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coble, Linda Contributor address; City; State; Zip Code 10900 A Crown Colony Drive Austin, TX 78747	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/23/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conner, JW Contributor address; City; State; Zip Code 12000 Sleepy Hollow Road Manchaca, TX 78652	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 08/18/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crockett, MH Contributor address; City; State; Zip Code PO Box 2066 Austin, TX 78768	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) MH Crockett Properties	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/10 Report: 6/21

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00007207

4 Date

08/23/2010

5 Full name of contributor out-of-state PAC (ID# _____)
Daywood, John Carl (Mr.)

6 Contributor address; City; State; Zip Code
600 Sabine St Ste 200
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 Principal occupation / Job title (See Instructions)
Realtor

10 Employer (See Instructions)
Self

Date

Full name of contributor out-of-state PAC (ID# _____)
Denman, Charles (Mr.)

08/12/2010

Contributor address; City; State; Zip Code
8317 Club Ridge Drive 106
Austin, TX 78735

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Realtor

Employer (See Instructions)
Charles Denman & Associates

Date

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

08/05/2010

Contributor address; City; State; Zip Code
2304 Vassal Drive
Austin, TX 78748

Amount of contribution (\$)

\$75.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Trade Association Director

Employer (See Instructions)
Texas Petroleum Marketers and C-Store Association

Date

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

08/23/2010

Contributor address; City; State; Zip Code
1412 Muddy Waters
Pflugerville, TX 78660

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
SOS Electronics

Date

Full name of contributor out-of-state PAC (ID# _____)
Gerharter, Sallie (Ms.)

08/17/2010

Contributor address; City; State; Zip Code
1612 Ashberry Dr
Austin, TX 78723-1106

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/10 Report: 7/21	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date 08/22/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, Gregory (Mr.) 6 Contributor address; City; State; Zip Code 10817 Olympia Fields Loop Austin, TX 78747	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Party Machines. com Inc.	
Date 08/02/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hall, Karen (Ms.) Contributor address; City; State; Zip Code 21351 Blake Manor Road Manor, TX 78653	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Travis County Corrections	
Date 08/02/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, David (Mr.) Contributor address; City; State; Zip Code 10711 Burnet Road, Suite 330 Austin, TX 78758	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) The Hartman Foundation	
Date 08/02/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, Douglas (Mr.) Contributor address; City; State; Zip Code 10711 Burnet Road, Suite 330 Austin, TX 78758	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Hartman and Associates	
Date 08/09/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haynes, Earnest (Mr.) Contributor address; City; State; Zip Code 3600 Quiette Dr Austin, TX 78754	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 6/10 Report: 8/21

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00007207

4 Date

08/12/2010

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

6 Contributor address; City; State; Zip Code
3103 Bamsley Drive
Austin, TX 78745

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
LVN

10 Employer (See Instructions)

St Davids South Austin Hospital

Date

08/12/2010

Full name of contributor out-of-state PAC (ID# _____)
Lasher, Myron (Mr.)

Contributor address; City; State; Zip Code
1716 Camino Viejo
Austin, TX 78758

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Systems Engineer

Employer (See Instructions)

Camber Corporation

Date

08/12/2010

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

Contributor address; City; State; Zip Code
2803 Horseshoe Bend Cove
Austin, TX 78704

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Retired

Date

08/25/2010

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

Contributor address; City; State; Zip Code
6202 Shoal Creek Drive
Austin, TX 78757

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)

McBride's Guns

Date

08/12/2010

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

Contributor address; City; State; Zip Code
5210 Langwood Drive
Austin, TX 78754

Amount of
contribution (\$)

\$35.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Technical Writer

Employer (See Instructions)

SCCI

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/10 Report: 9/21

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00007207

4 Date

5 Full name of contributor out-of-state PAC (ID# _____)
McNamara, Billy J. (Mr.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

08/12/2010

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

\$150.00

(If travel outside of Texas, complete Schedule T)

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

10 Employer (See Instructions)
Triple S Petroleum

Date

Full name of contributor out-of-state PAC (ID# _____)
McNamara, Jerry (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

08/12/2010

Contributor address; City; State; Zip Code
2704 Burnwood Ct.
Arlington, TX 76016

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Facilities Manager

Employer (See Instructions)
Champion Cheer Allstars

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

08/23/2010

Contributor address; City; State; Zip Code
13005 Esplande Street
Austin, TX 78727

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Principal

Employer (See Instructions)
Tri Star Autos

Date

Full name of contributor out-of-state PAC (ID# _____)
O'Grady, Patrick

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

08/12/2010

Contributor address; City; State; Zip Code
701 Rogart Drive
Briar Cliff, TX 78669

\$75.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

08/12/2010

Contributor address; City; State; Zip Code
PO Box 789
Manchaca, TX 78652-0789

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 8/10 Report: 10/21

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00007207

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
08/11/2010 Rainosek, Gary E. (Mr.)

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

6 Contributor address; City; State; Zip Code
10304 Old San Antonio
Austin, TX 78748

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Director of Marketing and Sales

10 Employer (See Instructions)
PMG

Date Full name of contributor out-of-state PAC (ID# _____)
07/30/2010 Republican Club of Austin PAC

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

Contributor address; City; State; Zip Code
106 Laurel Lane
Austin, TX 78705

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
PAC

Employer (See Instructions)
PAC

Date Full name of contributor out-of-state PAC (ID# _____)
08/12/2010 Salinas, Bernardo (Mr.)

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

Contributor address; City; State; Zip Code
7211 Easy Wind Dr. Unit 1334
Austin, TX 78752

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Software Development

Employer (See Instructions)
SCCI

Date Full name of contributor out-of-state PAC (ID# _____)
09/21/2010 Schoch, Charles

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

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

\$325.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Customer Service

Employer (See Instructions)
Activant

Date Full name of contributor out-of-state PAC (ID# _____)
08/12/2010 Sellstrom, Shannon (Mr.)

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

Contributor address; City; State; Zip Code
13202 Turkey Roost Drive
Manchaca, TX 78652

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Elementary School Principal

Employer (See Instructions)
AISD

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/10 Report: 11/21	
2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00007207	
4 Date 07/02/2010	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shive, James (Mr.) 6 Contributor address; City; State; Zip Code 6505 Aubumdale Street Austin, TX 78723	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Archivist		10 Employer (See Instructions) Adjutant General	
Date 08/28/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Allen Contributor address; City; State; Zip Code 4911 E. 7th Street Austin, TX 78702	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner Manager		Employer (See Instructions) Triple S Petroleum	
Date 09/03/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Frank (Mr.) Contributor address; City; State; Zip Code PO Box 6156 Austin, TX 78762	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner Manager		Employer (See Instructions) Triple S Petroleum	
Date 08/22/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steedley, Susan Contributor address; City; State; Zip Code 1200 Laurelleaf Drive Pflugerville, TX 78660	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Frost Bank	
Date 08/24/2010	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tait, Liz (Ms.) Contributor address; City; State; Zip Code 5302 S. Scout Island Circle Austii, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Antiques Dealer		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #
Schedule: 10/10 Report: 12/21

2 FILER NAME McNamara, Mike (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00007207

4 Date
08/12/2010

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

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

6 Contributor address; City; State; Zip Code
800 Sykes Ct.
Pflugerville, TX 78660

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Executive

10 Employer (See Instructions)
Travis County Constable

Date
08/23/2010

Full name of contributor out-of-state PAC (ID# _____)
Webster, Brent (Mr.)

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

Contributor address; City; State; Zip Code
4501 Beaver Creek
Austin, TX 78759

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Assistant County Attorney

Employer (See Instructions)
Williamson County

Date
08/24/2010

Full name of contributor out-of-state PAC (ID# _____)
Wehbe, Najib (Mr.)

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

Contributor address; City; State; Zip Code
5902 Mountain Villa Dr
Austin, TX 78731

\$550.00

Food & Beverage for Fundraising Event

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Sales

Employer (See Instructions)
Self

Date
09/06/2010

Full name of contributor out-of-state PAC (ID# _____)
Whatley, R.T. (Mr.)

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

Contributor address; City; State; Zip Code
3920 Coopers Hawk Cv
Austin, TX 78738

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date
08/12/2010

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

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

Contributor address; City; State; Zip Code
13492 Research Blvd, Suite 120-141
Austin, TX 78750

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Self

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: 1/9 Report: 13/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 07/27/2010	5 Payee name Bells Int'l
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6 Amount (\$) \$275.23	7 Payee address City; State; Zip Code 109 Denson Dr. Austin, TX 78752
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Campaign Materials	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Full Color Campaign Buttons
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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 07/30/2010	Payee name Cellular World Cingular Wireless
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Amount (\$) \$25.97	Payee address City; State; Zip Code 4815 W Braker Ln Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Phone	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Purchase of Cell phone accessory for Campaign cell phone
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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 07/30/2010	Payee name Cellular World Cingular Wireless
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Amount (\$) \$297.68	Payee address City; State; Zip Code 4815 W Braker Ln Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Phone	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Cell Phone Purchase
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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 09/14/2010	Payee name Dan Neil Campaign
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Amount (\$) \$25.00	Payee address City; State; Zip Code 3801 N. Capital of Texas Hwy. Suite E-240/ #130 Austin, TX 78746
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to attend 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: 2/9 Report: 14/21		2 FILER NAME McNamara, Mike (Mr.)		3 ACCOUNT # (TEC filers) 00007207	
4 Date 07/27/2010	5 Payee name Donovan Mill Works				
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code TX				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Contribution Refund		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Refund of Contribution		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 08/11/2010	Payee name El Rincon Mexican				
Amount (\$) \$9.85	Payee address City; State; Zip Code 200 E. Pecan Street Pflugerville, TX 78660				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meal expense during campaign travel		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/01/2010	Payee name Fast Signs				
Amount (\$) \$151.43	Payee address City; State; Zip Code 3010 South Lamar Suite B Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Campaign Materials		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Banner		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 08/13/2010	Payee name Friends of the NRA				
Amount (\$) \$75.00	Payee address City; State; Zip Code 11250 Waples Mill Road Fairfax, VA 22030				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Meal		
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: 3/9 Report: 15/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 08/15/2010	5 Payee name Frys Electronics
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6 Amount (\$) \$84.42	7 Payee address City; State; Zip Code 12707 North Mopac Expressway Austin, TX 78727
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Campaign Supplies	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing & Toner Supplies for Campaign
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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 09/17/2010	Payee name GANL
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Amount (\$) \$60.00	Payee address City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign 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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Date 08/08/2010	Payee name Gideon, Matthew
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Amount (\$) \$131.25	Payee address City; State; Zip Code PO Box 90363 Austin, TX 78709
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Design Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Powerpoint, Letterhead and Business Cards
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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 08/16/2010	Payee name Hills Cafe
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Amount (\$) \$1,179.00	Payee address City; State; Zip Code 4700 S Congress Ave Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food & Beverage for Campaign 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	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: 4/9 Report: 16/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 09/22/2010	5 Payee name Home Depot
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6 Amount (\$) \$19.45	7 Payee address City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Campaign Materials	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for Campaign Signs
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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 08/23/2010	Payee name IHOP
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Amount (\$) \$19.10	Payee address City; State; Zip Code TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Meeting
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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 08/12/2010	Payee name Intercontinental Hotel
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Amount (\$) \$7.00	Payee address City; State; Zip Code 701 Congress Ave. Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking Fee for Campaign Meeting
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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 07/26/2010	Payee name Pat McGuiness Campaign
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Amount (\$) \$100.00	Payee address City; State; Zip Code 9310 Old Lampasas Tr Austin, TX 78750
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign 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	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: 5/9 Report: 17/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 07/23/2010	5 Payee name Paypal
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6 Amount (\$) \$7.33	7 Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation service fee
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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 08/03/2010	Payee name Paypal
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Amount (\$) \$0.59	Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution service 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 08/03/2010	Payee name Paypal
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Amount (\$) \$7.55	Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation Service 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 08/05/2010	Payee name Paypal
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Amount (\$) \$2.48	Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation service 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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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: 6/9 Report: 18/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 08/12/2010	5 Payee name Paypal
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6 Amount (\$) \$2.48	7 Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> donation service 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 08/19/2010	Payee name Paypal
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Amount (\$) \$3.20	Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation service 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 08/23/2010	Payee name Paypal
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Amount (\$) \$3.20	Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> donation service 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 08/24/2010	Payee name Paypal
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Amount (\$) \$7.55	Payee address City; State; Zip Code P.O. Box 45950 Omaha, NE 68145
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> donation service 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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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: 7/9 Report: 19/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 09/03/2010	5 Payee name Postmaster
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6 Amount (\$) \$17.60	7 Payee address City; State; Zip Code Northeast Station Austin, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Postage	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Mailing
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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 08/12/2010	Payee name Randalls Store
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Amount (\$) \$19.99	Payee address City; State; Zip Code 10900 Research Blvd Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cake for Campaign 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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Date 09/20/2010	Payee name Sir Speedy
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Amount (\$) \$86.60	Payee address City; State; Zip Code 211 E. 7th Street, Suite 100 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Letters for Fundraising 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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Date 09/07/2010	Payee name Springhill Restaurant
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Amount (\$) \$15.93	Payee address City; State; Zip Code 13212 W Hwy 71 Bee Caves, TX 78738
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Meal
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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: 8/9 Report: 20/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 08/18/2010	5 Payee name Starbucks
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6 Amount (\$) \$10.01	7 Payee address City; State; Zip Code 10th and Congress Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Coffee for Campaign Meeting
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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 08/20/2010	Payee name Starbucks
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Amount (\$) \$2.98	Payee address City; State; Zip Code 10th and Congress Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Meeting
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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 09/15/2010	Payee name The Bumper Sticker
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Amount (\$) \$348.29	Payee address City; State; Zip Code 612 W.34th Street Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Campaign Materials	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Bumper Stickers
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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 08/23/2010	Payee name Travis County Republican Party
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Amount (\$) \$500.00	Payee address City; State; Zip Code 7901 Cameron Rd. #3-202 Austin, TX 78754
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TCRP Ballot Book
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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: 9/9 Report: 21/21	2 FILER NAME McNamara, Mike (Mr.)	3 ACCOUNT # (TEC filers) 00007207
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4 Date 08/02/2010	5 Payee name USPS
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6 Amount (\$) \$15.84	7 Payee address City; State; Zip Code 8225 Gross Park Drive Austin, TX 78710
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER - Postage	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing Expenses
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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 08/31/2010	Payee name Vargo, Erin (Ms.)
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Amount (\$) \$500.00	Payee address City; State; Zip Code 204 Lakeway Drive Georgetown, TX 78628
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Strategic Communications
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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 08/16/2010	Payee name Victor Soliminine
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Amount (\$) \$200.00	Payee address City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Entertainment for Campaign 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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