

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)
9285

2 Total pages filed:

7

OFFICE USE ONLY

Date Received

TRAVIS COUNTY CLERK
TRAVIS COUNTY, TEXAS

2018 JUL 30 PM 2:18

FILED FOR RECORD

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Brandy
Mueller

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE

Change of Address

605 W. 10th St.
Austin, Tx 78701

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 413-8569 / 891-9677

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Martha
Dickie

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE

2301 S. Capital of Tx Hwy
Austin, Tx 78746

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 474-9486

9 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 COH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year

1 / 1 / 18 THROUGH 6 / 30 / 18

11 ELECTION

ELECTION DATE: Month Day Year

- Primary Runoff Other Description
- General Special

12 OFFICE

OFFICE HELD (if any)

Travis County Court
at Law #6

13 OFFICE SOUGHT (if known)

Judge

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME Mueller, Brandy 15 Filer ID (Ethics Commission Filers) 7

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<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	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>250.00</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>987.02</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>13,588.65</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

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.

AFFIX NOTARY STAMP / SEAL ABOVE

Brandy Mueller
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Brandy Mueller, this the 30 day of July, 20 18, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

CARLOS LIMONES
Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
		7
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 250.00
2.	<input type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 987.02
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1: **7**

2 FILER NAME

Brandy Mueller

3 Filer ID (Ethics Commission Filers)

4 Date

January 2018

5 Full name of contributor

AFSCME Vote PAC

out-of-state PAC ID#

7 Amount of contribution (\$)

Austin, TX \$250.00

6 Contributor address:

City: State: Zip Code

8 Contributor's principal occupation

Jack Kirtman, Campaign Treasurer VOTE PAC

10 Contributor's employer/law firm

(Retired)

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

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

Date

Full name of contributor

out-of-state PAC ID#

Amount of contribution (\$)

Contributor address:

City: State: Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

Date

Full name of contributor

out-of-state PAC ID#

Amount of contribution (\$)

Contributor address;

City: State: Zip Code

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)

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Brandy Mueller</i>	3 Filer ID (Ethics Commission Filers) <i>2</i>
4 Date <i>1-26-18</i>	5 Payee name <i>Seedling Foundation</i>	
6 Amount (\$) <i>\$300.00</i>	7 Payee address; City; State; Zip Code <i>8001 Centre Park Drive, Ste 140, Austin, TX 78754</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contribution/Donation made by Candidate / Officeholder</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Event Expense (political) Donations</i>
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>3-23-18</i>	Payee name <i>Lone Star Trophy</i>	
Amount (\$) <i>\$81.90</i>	Payee address; City; State; Zip Code <i>5201 N. Lamar Blvd., Austin, TX 78751</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Award Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Recognition Gift</i>
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>4-2-18</i>	Payee name <i>The Limited Edition</i>	
Amount (\$) <i>\$54.12</i>	Payee address; City; State; Zip Code <i>5717 Second Street, Katy, TX 77493 77493</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Award Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Recognition Gift</i>
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Brandy Mueller</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>1-13-18</i>		5 Payee name <i>Central Austin Progressive Democrats</i>			
6 Amount (\$) <i>\$100.00</i>		7 Payee address; City; State; Zip Code <i>PO Box 413, Austin, TX 78767</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>-Contribution / Donation made by candidate / office holder (political)</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Political Contributions</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>1-26-18</i>		Payee name <i>The Links Foundation, Inc.</i>			
Amount (\$) <i>\$220.00</i>		Payee address; City; State; Zip Code <i>PO Box 143255, Austin, TX 78714</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Contribution / Donation made by candidate / office holder (Event) (political)</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Donation</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>2-20-18</i>		Payee name <i>Travis County Democrats Party</i>			
Amount (\$) <i>189.00</i>		Payee address; City; State; Zip Code <i>1311 E. 6th St., Austin, TX 78702</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Contribution / Donation made by candidate / office holder (political)</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Political Contribution</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Brandy Mueller</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>4-2-18</i>	5 Payee name <i>Ollie Crintelmejer</i>	
6 Amount (\$) <i>\$42.00</i>	7 Payee address; City; State; Zip Code <i>10109 Tallera Dr. Austin, TX 78750</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Award Expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Recognition Gift</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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