

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000078	2 PAGE # 1 of 19
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Mike	MI
	NICKNAME	LAST Martinez	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 301 W. 2nd St. 2nd Floor Austin, TX 78701		
	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged </div>		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Janis	MI
	NICKNAME	LAST Pinnelli	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 50038 Austin, TX 78763		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 478-7816		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 04/30/2009 06/30/2009		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 05/10/2009		
11 OFFICE	OFFICE HELD (if any) City Council, Place 2		12 OFFICE SOUGHT (if known)
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****14 C/OH NAME** Martinez, Mike**15 ACCOUNT #** (Ethics Commission filers)
00000078**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**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

207.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

10,012.00

**EXPENDITURE
TOTALS**

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

\$

250.68

4. TOTAL POLITICAL EXPENDITURES

\$

33,915.98

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

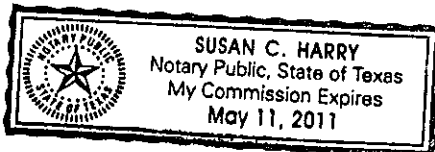
\$

24,525.01

**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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mike Martinez, this the 14th day of July, 2009, 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

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/8 Report: 3/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)

00000078

4 Date

05/07/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Blanton, Tom

6 Contributor address; City; State; Zip Code
P.O. Box 1028
1108 Lavaca
Austin, TX 78767

7 Amount of
contribution (\$)

\$300.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Legislative Affairs

10 Employer (See Instructions)
Texas Automobile Dealers Associatio

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Blatt, Jeff & Liz

Contributor address; City; State; Zip Code
3801 Agape Lane
Austin, TX 78735

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
President / President

Employer (See Instructions)
Lakequest Enterprises / Sublime Interiors

Date

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bollinger, Steven

Contributor address; City; State; Zip Code
4201 Monterey Oaks Blvd.
#18
Austin, TX 78749

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Public Relations

Employer (See Instructions)
Hotze Runkle PLLC

Date

05/04/2009

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

Contributor address; City; State; Zip Code
2603 Wooldridge Drive
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Self

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Burgdorf, Barry

Contributor address; City; State; Zip Code
5902 Sedgfield Dr.
Austin, TX 78746

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)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/8 Report: 4/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)
00000078

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Caraway, Tharon

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

05/05/2009

6 Contributor address; City; State; Zip Code
12342 Hunter Chase Dr
Apt. 2418
Austin, TX 78729

\$320.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Client Relations

10 Employer (See Instructions)
Hotze Runkle PLLC

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Curry, Mark

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/08/2009

Contributor address; City; State; Zip Code
4000 Table Rock
Austin, TX 78731

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dan Shelley Attorney at Law

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/07/2009

Contributor address; City; State; Zip Code
305 W. 13th St.
Austin, TX 78701

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Daniel, Katrina

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2009

Contributor address; City; State; Zip Code
600 Wilmes Drive
Austin, TX 78752

\$60.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Duggins, David

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/07/2009

Contributor address; City; State; Zip Code
9200 MC Means Trail
Austin, TX 78737

\$75.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/8 Report: 5/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)
00000078

4 Date

05/07/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hackney, Clint

6 Contributor address; City; State; Zip Code
P.O. Box 163164
Austin, TX 78716

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Ford & Ferraro

Date

05/08/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hahn, Jeffrey

Contributor address; City; State; Zip Code
6700 Hot Springs Dr.
Austin, TX 78749

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)

Employer (See Instructions)

Date

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harward, Heather

Contributor address; City; State; Zip Code
6800 Austin Center Blvd.
Unit 851
Austin, TX 78731

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)

Employer (See Instructions)

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Henson, James

Contributor address; City; State; Zip Code
905 W. Elizabeth St.
Austin, TX 78704

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)

Employer (See Instructions)

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Higgins, Michael

Contributor address; City; State; Zip Code
7901 Taranto Dr.
Austin, TX 78729

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)
requested

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/8 Report: 6/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)
00000078

4 Date

05/09/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hornaday, Walter & Raina

6 Contributor address; City; State; Zip Code
908 West 18th St.
Austin, TX 78701

7 Amount of
contribution (\$) \$700.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Generation Operator / Generation Operator

10 Employer (See Instructions)
Cielo Wind Services / Cielo Wind Services

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kelly, Susan

Contributor address; City; State; Zip Code
13401 Galleria Circle
307
Austin, TX 78738

Amount of
contribution (\$) \$300.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)
requested

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Knight, James & Alexa

Contributor address; City; State; Zip Code
400 Las Lomas Dr.
Austin, TX 78746

Amount of
contribution (\$) \$700.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Principal / none

Employer (See Instructions)
Bury & Partners / none

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lee, Jesse & Barbara

Contributor address; City; State; Zip Code
54 Rainey St.
No. 1001
Austin, TX 78701

Amount of
contribution (\$) \$700.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
CFO / Director of Accounting

Employer (See Instructions)
Origin Homes / Roscoe Properties

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lee, Randy

Contributor address; City; State; Zip Code
P.O. Box 1806
Austin, TX 78767

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)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/8 Report: 7/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)
00000078

4 Date

05/01/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lydon, James

6 Contributor address; City; State; Zip Code
9931 Barbrook Drive
Austin, TX 78726

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Midence, Yuniedth

Contributor address; City; State; Zip Code
617 Furlong
Austin, TX 78746

Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Murray, Ginger

Contributor address; City; State; Zip Code
4424 Gaines Ranch Loop
Apt. 511
Austin, TX 78735

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)

Employer (See Instructions)

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pacheco, Brian

Contributor address; City; State; Zip Code
303 West Fifth St.
Austin, TX 78701

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)

Employer (See Instructions)

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pedersen, Craig

Contributor address; City; State; Zip Code
4703 Trail Crest Circle
Austin, TX 78735

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Vice President - Water Resources - Texas

Employer (See Instructions)
URS

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/8 Report: 8/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)

00000078

4 Date

05/05/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Perez, Robert

6 Contributor address; City; State; Zip Code
600 Navarro Ste. 500
San Antonio, TX 78205

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/09/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rieck, Peter

Contributor address; City; State; Zip Code
6805 Vallecito Dr.
Austin, TX 78759

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)
Architect

Employer (See Instructions)
Peter Rieck, Assoc. AIA

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rodriguez, Jennifer Shelley

Contributor address; City; State; Zip Code
485 Nicholas Lane
Driftwood, TX 78619

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rodriguez, Marc

Contributor address; City; State; Zip Code
1122 Colorado St., Ste. 2399
Austin, TX 78701

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Government Affairs

Employer (See Instructions)
Self

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Saenz Public Affairs

Contributor address; City; State; Zip Code
2407 Coral Ridge Cir
Austin, TX 78747

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)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/8 Report: 9/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)
00000078

4 Date

05/09/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Firefighters PAC

6 Contributor address; City; State; Zip Code
P.O. Box 5100
San Antonio, TX 78201

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shanklin, John Carter

Contributor address; City; State; Zip Code
3503B Bridle Path
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Property Management

Employer (See Instructions)
Jacaranda Investments

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stanford, Blake

Contributor address; City; State; Zip Code
4906 Tortuga Place
Austin, TX 78731

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
President/CEO

Employer (See Instructions)
Southwest Human Development Services

Date

04/30/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Strmiska, Gregory & Christi

Contributor address; City; State; Zip Code
8947 Wimberly Cove
Austin, TX 78735

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Engineer / none

Employer (See Instructions)
Bury & Partners / none

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
The Law Office of Shane Boasberg

Contributor address; City; State; Zip Code
106 E. 6th St.
Ste. 900
Austin, TX 78704

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)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/8 Report: 10/19

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)

00000078

4 Date

05/07/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Turrieta, Gilbert

6 Contributor address; City; State; Zip Code
1122 Colorado, Ste 222
Austin, TX 78701

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)
Event Expense

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Warth, Dan

Contributor address; City; State; Zip Code
2716 Rio Mesa Dr.
Austin, TX 78732

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Senior Project Manager

Employer (See Instructions)
URS

Date

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Yarbrough, Brian

Contributor address; City; State; Zip Code
3201 Highland Terrace W
Austin, TX 78731

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Erben & Yarbrough

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/9 Report: 11/19

2 FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date

05/18/2009

5 Payee name

Austin Chronicle

7 Amount
(\$)

\$1,370.00

6 Payee address; City; State; Zip CodeP.O. Box 49066
Austin, TX 78765**8** Purpose of payment (See instructions regarding type of information required.)

Advertising

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

05/18/2009

Payee name

Austin Chronicle

Amount
(\$)

\$1,370.00

Payee address; City; State; Zip Code

P.O. Box 49066
Austin, TX 78765

Purpose of payment (See instructions regarding type of information required.)

Advertising

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

05/15/2009

Payee name

Avis, Eric

Amount
(\$)

\$1,500.00

Payee address; City; State; Zip Code

360 Nueces St., Unit 2304
Austin, TX 78701

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

06/30/2009

Payee name

Black Austin Democrats

Amount
(\$)

\$60.00

Payee address; City; State; Zip Code

P.O. Box 6276
Austin, TX 78762

Purpose of payment (See instructions regarding type of information required.)

donation

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/9 Report: 12/19**2** FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date**5** Payee name

Butts, David

7 Amount
(\$)

05/15/2009

6 Payee address; City; State; Zip Code1914 Patton Lane
Austin, TX 78723

\$1,000.00

8 Purpose of payment (See instructions regarding type of information required.)

Consulting

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Dandy Idea

Amount
(\$)

05/07/2009

Payee address; City; State; Zip Code

P.O. Box 302965
Austin, TX 78703

\$1,500.00

Purpose of payment (See instructions regarding type of information required.)

Graphic Design

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Everhart, Amy

Amount
(\$)

05/28/2009

Payee address; City; State; Zip Code

600 Bouldin Ave.
Austin, TX 78704

\$3,500.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Facebook Advertising

Amount
(\$)

05/09/2009

Payee address; City; State; Zip Code

156 University Ave.
Palo Alto, CA 94301

\$116.43

Purpose of payment (See instructions regarding type of information required.)

Advertising

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/9 Report: 13/19

2 FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date

05/08/2009

5 Payee name
Fedex Kinkos**6** Payee address; City; State; Zip Code
327 Congress #100
Austin, TX 78701**7** Amount
(\$)

\$64.95

8 Purpose of payment (See instructions regarding type of information required.)

Copies

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

06/30/2009

Payee name
Futuro FundPayee address; City; State; Zip Code
4315 Guadalupe, suite 300
Austin, TX 78751Amount
(\$)

\$1,500.00

Purpose of payment (See instructions regarding type of information required.)

charitable donation

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/26/2009

Payee name
Garrett, PhilipPayee address; City; State; Zip Code
5503 B. Cork Path
Austin, TX 78745Amount
(\$)

\$74.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/15/2009

Payee name
Hall, TiffanyPayee address; City; State; Zip Code
1303 East Cesar Chavez Apt. A
Austin, TX 78702Amount
(\$)

\$96.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/9 Report: 14/19**2** FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date

05/01/2009

5 Payee name
Harry, Susan**6** Payee address; City; State; Zip Code
2520 Longview, Ste. 211
Austin, TX 78705**7** Amount
(\$)

\$1,500.00

8 Purpose of payment (See instructions regarding type of information required.)

Finance consulting services

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/09/2009

Payee name
Hills CaféPayee address; City; State; Zip Code
4700 S. Congress
Austin, TX 78727Amount
(\$)

\$212.33

Purpose of payment (See instructions regarding type of information required.)

Election night party

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/09/2009

Payee name
Hills CaféPayee address; City; State; Zip Code
4700 S. Congress
Austin, TX 78727Amount
(\$)

\$883.75

Purpose of payment (See instructions regarding type of information required.)

Election night party

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

06/01/2009

Payee name
Jimenez, ArthurPayee address; City; State; Zip Code
1112 Henninger
Austin, TX 78702Amount
(\$)

\$160.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/9 Report: 15/19**2** FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date**5** Payee name
Kelly Graphics**7** Amount
(\$)

05/05/2009

6 Payee address; City; State; Zip Code
1409 Quaker Ridge
Austin, TX 78746

\$6,390.71

8 Purpose of payment (See instructions regarding type of information required.)
Printing & mailing services**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Livaudais, ShelleyAmount
(\$)

06/12/2009

Payee address; City; State; Zip Code
10604 Chestnut Ridge Rd.
Austin, TX 78726

\$400.00

Purpose of payment (See instructions regarding type of information required.)
Website** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Mason, MaryAmount
(\$)

05/15/2009

Payee address; City; State; Zip Code
2802 Whitis Ave. Apt. 106
Austin, TX 78705

\$240.00

Purpose of payment (See instructions regarding type of information required.)
Contract Labor** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Middleton, JimAmount
(\$)

05/08/2009

Payee address; City; State; Zip Code
requested
TX

\$150.00

Purpose of payment (See instructions regarding type of information required.)
event entertainment** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/9 Report: 16/19**2** FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date

05/26/2009**5** Payee name
Miner, Ashley

6 Payee address; City; State; Zip Code
8600 RR 620 N. #2925
Austin, TX 78729**7** Amount
(\$)

\$84.00**8** Purpose of payment (See instructions regarding type of information required.)
Contract Labor**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
NokoaAmount
(\$)

06/30/2009

Payee address; City; State; Zip Code
P.O. Box 1131
Austin, TX 78767

\$300.00

Purpose of payment (See instructions regarding type of information required.)
advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
PaypalAmount
(\$)

05/10/2009

Payee address; City; State; Zip Code
P.O. Box 7027
Mountain View, CA 94039

\$52.85

Purpose of payment (See instructions regarding type of information required.)
Credit card processing fees** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
People Calling PeopleAmount
(\$)

05/20/2009

Payee address; City; State; Zip Code
3948 Legacy Dr. Ste. 106, PMB 272
Plano, TX 75023

\$1,570.20

Purpose of payment (See instructions regarding type of information required.)
Robocall** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/9 Report: 17/19

2 FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date

05/20/2009

5 Payee name

Ranes, Jim

7 Amount
(\$)

\$369.90

6 Payee address; City; State; Zip Code1501 Barton Springs Rd. #233
Austin, TX 78704**8** Purpose of payment (See instructions regarding type of information required.)

Graphic Design

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

05/26/2009

Payee name

Rybidi, Deborah

Amount
(\$)

\$84.00

Payee address; City; State; Zip Code

8600 RR 620 N. #2925
Austin, TX 78729

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

05/08/2009

Payee name

Todd Phelps Band

Amount
(\$)

\$1,500.00

Payee address; City; State; Zip Code

requested
TX

Purpose of payment (See instructions regarding type of information required.)

event entertainment

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

05/05/2009

Payee name

Travis, Rachel

Amount
(\$)

\$1,165.00

Payee address; City; State; Zip Code

requested

Purpose of payment (See instructions regarding type of information required.)

blockwalking

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/9 Report: 18/19**2** FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date

06/30/2009

5 Payee name

Travis County Democratic Party

7 Amount
(\$)

\$120.00

6 Payee address; City; State; Zip Code1311-B East 6th St.
Austin, TX 78702**8** Purpose of payment (See instructions regarding type of information required.)
donation(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/11/2009

Payee name

Vertical Response

Amount
(\$)

\$67.18

Payee address; City; State; Zip Code

501 2nd St, Suite 700
San Francisco, CA 94017Purpose of payment (See instructions regarding type of information required.)
Email list management(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/14/2009

Payee name

Williams, Clayton & Modesta

Amount
(\$)

\$700.00

Payee address; City; State; Zip Code

6 Desta Drive, Ste. 6500
Midland, TX 79705Purpose of payment (See instructions regarding type of information required.)
Refund of Contribution(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/15/2009

Payee name

Williamson, Laura

Amount
(\$)

\$2,000.00

Payee address; City; State; Zip Code

12417 Audane Dr.
Austin, TX 78727Purpose of payment (See instructions regarding type of information required.)
Campaign Manager Salary(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/9 Report: 19/19**2** FILER NAME Martinez, Mike**3** ACCOUNT # (Ethics Commission filers)
00000078**4** Date

05/28/2009

5 Payee name

Williamson, Laura

7 Amount
(\$)

\$3,500.00

6 Payee address; City; State; Zip Code12417 Audane Dr.
Austin, TX 78727**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Manager Salary

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/15/2009

Payee name

Woody, Thaddeus

Amount
(\$)

\$64.00

Payee address; City; State; Zip Code

702 W. 25th St. Apt. 301
Austin, TX 78705

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held: