



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME

Lisa L. Birkman

16 ACCOUNT # (Ethics Commission filers)

17 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

GENERAL

SPECIFIC

additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

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

\$ 30,925.00

EXPENDITURE TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 12,662.65

CONTRIBUTION BALANCE

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

\$ 20,395.52

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

19 AFFIDAVIT

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

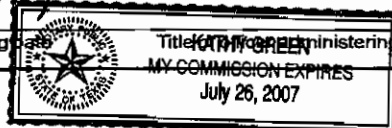
*Lisa L. Birkman*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lisa L. Birkman, this the 14 day of July, 2005, to certify which, witness my hand and seal of office.

*Kathy Green*  
Signature of officer administering oath

Printed name of officer administering oath



Title KATHY GREEN administering oath  
MY COMMISSION EXPIRES  
July 26, 2007

Revised 11/05/2003

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: <b>21</b>	
2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>2/23/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jim Powell</b>	7 Amount of contribution (\$) <b>250.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>9618 Vista View Dr. Austin, Tx 78750</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>3/21/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kerry Russell</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>20120 Westlake Parkway Georgetown, TX 78628</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/21/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William D. Bryce</b>	Amount of contribution (\$) <b>50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>511 Main St. Georgetown, TX 78626</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/21/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alan M. Glen</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1717 West 6th St., #300 Austin, TX 78703</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/21/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jack Garey</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>6450 RR 2243 Georgetown, TX 78628</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: **21**

2 FILER NAME  
**Lisa L. Birkman**

3 ACCOUNT # (Ethics Commission filers)

4 Date  
**3/21/05**

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Bill and Bonnie Stump**

6 Contributor address; City; State; Zip Code  
**2804 Gabriel View  
Georgetown, TX 78628**

7 Amount of contribution (\$) **150.00**

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
**3/21/05**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Johnny Gantt**

Contributor address; City; State; Zip Code  
**221 Stearman  
Georgetown, TX 78628**

Amount of contribution (\$) **500.00**

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**3/21/05**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Maxwell for Mayor Campaign**

Contributor address; City; State; Zip Code  
**P. O. Box 1762  
Round Rock, TX 78680**

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**3/21/05**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Reid Ryan**

Contributor address; City; State; Zip Code  
**27 Meandering Way  
Round Rock, TX 78664**

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**3/21/05**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Spike Robinson**

Contributor address; City; State; Zip Code  
**P. O. Box 9556  
Austin, TX 78766**

Amount of contribution (\$) **250.00**

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

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1 Total pages Schedule A: **21**

2 FILER NAME

Lisa L. Birkman

3 ACCOUNT # (Ethics Commission filers)

4 Date  
3/21/05

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Oscar Robinson

7 Amount of contribution (\$) **250.00**

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
P. O. box 9556  
Austin, TX 78766

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
3/21/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Nancy Rabb

Amount of contribution (\$) **200.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
2604 Sunrise  
Round Rock, TX 78664

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/21/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Tom E. Nelson Jr.

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
3404 Glenview Ave  
Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/21/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Commissioner Gerald T. Daugherty

Amount of contribution (\$) **250.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1403 Club Ridge Cv  
Austin, TX 78735

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/21/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Friends of Gerald Daugherty Campaign

Amount of contribution (\$) **250.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1403 Club Ridge Cv  
Austin, TX 78735

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** Total pages Schedule A: **21**

**2** FILER NAME

Lisa L. Birkman

**3** ACCOUNT # (Ethics Commission filers)

**4** Date

3/21/05

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Chris A. Mealy

**6** Contributor address; City; State; Zip Code

P. O. Box 326  
Georgetown, TX 78627

**7** Amount of contribution (\$)

50.00

**8** In-kind contribution description (if applicable)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

3/21/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

John E. Sloan

Contributor address; City; State; Zip Code

1802 Shadowbrook Cir  
Round Rock, TX 78681

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/21/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Everett Schimdt

Contributor address; City; State; Zip Code

145 Stetson TR  
Georgetown, TX 78628

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/6/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Harvey M. Allen

Contributor address; City; State; Zip Code

527 Sarazan Loop  
Georgetown, TX 78628

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/6/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Scott Spears

Contributor address; City; State; Zip Code

P. O. Box 160580  
Austin, TX 78716

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule A: **21**

2 FILER NAME **Lisa L. Birkman** 3 ACCOUNT # (Ethics Commission filers)

4 Date <b>4/6/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Charles Carter</b>	7 Amount of contribution (\$) <b>50.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>234 Old Oaks Dr. Georgetown, TX 78628</b>			

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date <b>4/6/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Gavumik</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>20124 Westlake Parkway Georgetown, TX 78628</b>			

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

Date <b>4/6/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leo Wood</b>	Amount of contribution (\$) <b>50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>117 Spanish Oak Cir. Georgetown, TX 78628</b>			

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

Date <b>4/6/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Blake Magee</b>	Amount of contribution (\$) <b>1,000.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1400 Elton Ln Austin, TX 78703</b>			

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

Date <b>4/6/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Landy Warren</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1716 West End Place Round Rock, TX 78681</b>			

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

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: <b>21</b>	
2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>4/6/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kevin Henderson</b>	7 Amount of contribution (\$) <b>100.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>213 N. Mays St. Round Rock, TX 78664</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bob Gregory</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>2939 Westlake Cv Austin, TX 78746</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lauren Kuhnel</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1 Misty Woods Round Rock, TX 78664</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joe Baker</b>	Amount of contribution (\$) <b>750.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>959 Blue Spring Cv Round Rock, TX 78681</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Winstead, Sechrist, &amp; Minnick PAC</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5400 Renaissance Tower, 1201 Elm St Dallas, TX 75270</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

21

2 FILER NAME

Lisa L. Birkman

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/18/05

5 Full name of contributor

 out-of-state PAC (ID#)

Keith Young

7 Amount of contribution (\$)

1,000.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

7801 N. Capital of TX Hwy, #220  
Austin, TX 78731

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/18/05

Full name of contributor

 out-of-state PAC (ID#)

Sha Embree

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

15 Shaded Way  
Round Rock, TX 78664

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/05

Full name of contributor

 out-of-state PAC (ID#)

Cesar E. Sylva

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2208 Bright Cv  
Spicewood, TX 78669

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/05

Full name of contributor

 out-of-state PAC (ID#)

Thomas C. Arndt

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

19907 Kennemer  
Pflugerville, TX 78660

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/05

Full name of contributor

 out-of-state PAC (ID#)

Toni Moman

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1701 Johnson Way  
Round Rock, TX 78681

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

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**2** FILER NAME  
Lisa L. Birkman **3** ACCOUNT # (Ethics Commission filers)

<b>4</b> Date 4/18/05	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Eugenia G. Quick <b>6</b> Contributor address; City; State; Zip Code 603 Chisolm Trail Round Rock, TX 78681	<b>7</b> Amount of contribution (\$) 1,000.00	<b>8</b> In-kind contribution description (if applicable)
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**9** Principal occupation / Job title (See Instructions) **10** Employer (See Instructions)

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Home Builders Assoc. of Greater Austin PAC Contributor address; City; State; Zip Code 7952 Anderson Square Austin, Tx 78757	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
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Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paul W. Linehan Contributor address; City; State; Zip Code 3502 Lost Creek Blvd. Austin, TX 78735	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
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Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: David H. Hartman Contributor address; City; State; Zip Code 703A Oakland Austin, TX 78704	Amount of contribution (\$) 75.00	In-kind contribution description (if applicable)
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Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Alan M. Glenn Contributor address; City; State; Zip Code 1717 W. 6th St. #300 Austin, TX 78703	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
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Principal occupation / Job title (See Instructions) Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

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<b>2</b> FILER NAME Lisa L. Birkman		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date 4/18/05	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alan Adair Wooley	<b>7</b> Amount of contribution (\$) 250.00	<b>8</b> In-kind contribution description (if applicable)
<b>6</b> Contributor address; City; State; Zip Code 3609 Arrowhead Austin, TX 78731			
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. W. Waeltz	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2407 Oak Meadow Round Rock, TX 78681			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John S. Avery	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 400 E. Main St. Round Rock, TX 78664			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy Timmerman	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4903 Whitehorn CT Austin, TX 78746			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anna Lackey	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3002 Gabriel View Georgetown, TX 78626			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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1 Total pages Schedule A: **21**

2 FILER NAME

Lisa L. Birkman

3 ACCOUNT # (Ethics Commission filers)

4 Date  
4/18/055 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Half Assoc. State PAC

6 Contributor address; City; State; Zip Code

8616 Northwest Plaza Dr.  
Dallas, TX 752257 Amount of  
contribution (\$)

500.00

8 In-kind contribution  
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
4/18/05Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Linda McDaniel

Contributor address; City; State; Zip Code

2913 Gabriel View  
Georgetown, TX 78628Amount of  
contribution (\$)

50.00

In-kind contribution  
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/18/05Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Ronald E. Morrison

Contributor address; City; State; Zip Code

P. O. Box 555  
Round Rock, Tx 78680Amount of  
contribution (\$)

100.00

In-kind contribution  
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/18/05Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Shane Shafer

Contributor address; City; State; Zip Code

116 Skyline Rd  
Georgetown, TX 78628Amount of  
contribution (\$)

400.00

In-kind contribution  
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/18/05Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Billy G. Caffey

Contributor address; City; State; Zip Code

251 Goodnight Trail  
Dripping Springs, TX 78620Amount of  
contribution (\$)

250.00

In-kind contribution  
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>4/18/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Soheir S. Mitchell</b>	7 Amount of contribution (\$) <b>500.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>10503 Tweedsmuir Dr. Austin, TX 78750</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Anthony Dale</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>10521 Fosse Way Austin, TX 78717</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Charles N. Avery III</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>4029 Sable Oaks Dr. Round Rock, TX 78664</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patty Watson</b>	Amount of contribution (\$) <b>600.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1409 Malone St. Houston, TX 77007</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Garlyn Shelton</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P. O. Box 4025 Temple, Tx 76505</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: <b>21</b>	
2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>4/18/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ercel Brashear</b>	7 Amount of contribution (\$) <b>200.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>2955 B Dawn Dr. Georgetown, TX 78628</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Chuck Rice</b>	Amount of contribution (\$) <b>300.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P. O. Box 2154 Austin, TX 78768</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Robert Chody</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P. O. Box 1207 Round Rock, TX 78680</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alan Watson</b>	Amount of contribution (\$) <b>600.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5300 Holister #400 Houston, TX 77040</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sam L. Pfister</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P. O. Box 688 Georgetown, TX 78627</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: <b>21</b>	
2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission files)	
4 Date <b>4/18/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John M. Jansing</b>	7 Amount of contribution (\$) <b>500.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>8608 Crest Ridge Cir. Austin, TX 78750</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Hank Rothel</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5280 W. State Hwy 29 Georgetown, TX 78628</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>James A. Broaddus</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1301 S. Cap. of TX Hwy Ste 302 Austin, TX 78731</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jack W. Buchanan</b>	Amount of contribution (\$) <b>1,000.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>105 Whispering Spring Ln Georgetown, TX 78628</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John B. McMaster</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>120 W. 8th St. Georgetown, TX 78626</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> Total pages Schedule A: <b>21</b>	
<b>2</b> FILER NAME <b>Lisa L. Birkman</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date <b>4/18/05</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mike Davis</b>	<b>7</b> Amount of contribution (\$) <b>100.00</b>	<b>8</b> In-kind contribution description (if applicable)
<b>6</b> Contributor address; City; State; Zip Code <b>109 S. Shepard Round Rock, TX 78664</b>			
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>Date</b> <b>4/18/05</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Hays</b>	<b>Amount of contribution (\$)</b> <b>100.00</b>	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> <b>P. O. 689 Georgetown, TX 78627</b>			
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> <b>4/18/05</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Karen A. Friese</b>	<b>Amount of contribution (\$)</b> <b>100.00</b>	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> <b>6603 Cat Creek Trail Austin, Tx 78731</b>			
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> <b>4/18/05</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ralph E. Reed Jr.</b>	<b>Amount of contribution (\$)</b> <b>100.00</b>	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> <b>160 Post Oak Rd Driftwood, TX 78619</b>			
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> <b>4/18/05</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steven D. Kallman</b>	<b>Amount of contribution (\$)</b> <b>100.00</b>	<b>In-kind contribution description (if applicable)</b>
<b>Contributor address; City; State; Zip Code</b> <b>1106 S. Mays St. #100 Round Rock, TX 78664</b>			
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form. **1** Total pages Schedule A: **21**

**2** FILER NAME **Lisa L. Birkman** **3** ACCOUNT # (Ethics Commission filers)

<b>4</b> Date 4/18/05	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nelson Nagel</b>	<b>7</b> Amount of contribution (\$) <b>165.00</b>	<b>8</b> In-kind contribution description (if applicable)
	<b>6</b> Contributor address; City; State; Zip Code <b>400 W. Main St. Round Rock, Tx 78664</b>		

**9** Principal occupation / Job title (See Instructions) **10** Employer (See Instructions)

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mike Weaver</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>1508 S. Lamar Austin, Tx 78704</b>		

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

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Monica Silver</b>	Amount of contribution (\$) <b>200.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>17043 Gaelic Glen Ln Houston, TX 77084</b>		

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

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Thomas P. Hansell</b>	Amount of contribution (\$) <b>200.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>14613 Ballimamore Dr. Austin, tX 78717</b>		

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

Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sandra Howell</b>	Amount of contribution (\$) <b>200.00</b>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <b>307 S. Lynnwood Trl Cedar Park, TX 78613</b>		

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

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: <b>21</b>	
2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>4/18/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Anthony S. Corbett</b>	7 Amount of contribution (\$) <b>100.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>503 Wallace Dr. Austin, TX 78746</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mike Krusee Campaign</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>13231 Briar Hollow Austin, TX 787209</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dr. Wade McLeod</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>307 Gladeview Round Rock, TX 78681</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steven D. Paulson</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1200 Barton Crk Blvd #29 Austin, TX 78735</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/18/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steve Ogden Campaign</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P. O. Box 3126 Bryan, TX 77805</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

21

2 FILER NAME

Lisa L. Birkman

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/18/05

5 Full name of contributor

Armbrust &amp; Brown

 out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

100 Congress Ave #1300  
Austin, TX 78701

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/18/05

Full name of contributor

Travis Lucas

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

154 Village Commons  
Georgetown, TX 78628

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/05

Full name of contributor

C. Brian Cassidy

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

100 Congress Ave #300  
Austin, TX 78701

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/05

Full name of contributor

Richard H. Malone

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

1704 Treadwell St.  
Austin, Tx 78704

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/05

Full name of contributor

Richard J. Wheeler

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

16002 Canard Cir.  
Austin, TX 78734

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: **21**

2 FILER NAME

Lisa L. Birkman

3 ACCOUNT # (Ethics Commission filers)

4 Date  
4/18/05

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
David G. Bodenmann

7 Amount of contribution (\$)  
100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
10821 Range View Dr.  
Austin, TX 78730

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
4/18/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Glen R. Warren

Amount of contribution (\$)  
100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
9621 Bundoran Dr.  
Austin, TX 78717

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/18/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Joe V. Crawford

Amount of contribution (\$)  
10.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
3301 CR 268  
Leander, TX 78641

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/18/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Mike Springfield

Amount of contribution (\$)  
200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1003 W. Noton St.  
Pflugerville, Tx 78660

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/18/05

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Dan A. Gattis

Amount of contribution (\$)  
100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1850 CR 105  
Hutto, TX 78634

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

21

2 FILER NAME

Lisa L. Birkman

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/18/05

5 Full name of contributor

Janice Martin

 out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

 1 Chisolm Trail #3150  
 Round Rock, TX 78681

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/8/05

Full name of contributor

Martin Dietz

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

 106 Fannin Ave  
 Round Rock, TX 78664

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/8/05

Full name of contributor

Paul D. Workman

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

 4415 RO Dr.  
 Spicewood, TX 78669

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/8/05

Full name of contributor

Judy Limmer

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

 12510 FM 1660  
 Taylor, TX 76574

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/8/05

Full name of contributor

Jim Schwertner

 out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

 P. O. Box 1  
 Schwertner, TX 76573

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

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2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>5/8/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>C. D. Polumbo</b> 6 Contributor address; City; State; Zip Code <b>7705 Sandia Loop Austin, TX 78735</b>	7 Amount of contribution (\$) <b>500.00</b>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>5/8/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Texas Assoc of Realtors PAC</b> Contributor address; City; State; Zip Code <b>P. O. Box 1986 Austin, TX 78767</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>5/8/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>McCall, Parkhurst &amp; Horton</b> Contributor address; City; State; Zip Code <b>7717 N. Harwood #900 Dallas, TX 75201</b>	Amount of contribution (\$) <b>500.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>5/8/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>James H. Mills</b> Contributor address; City; State; Zip Code <b>P. O. Box 411 Georgetown, TX 78627</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>5/8/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jimmy Jacobs</b> Contributor address; City; State; Zip Code <b>P. O. Box 249 Georgetown, TX 78627</b>	Amount of contribution (\$) <b>1,000.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

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2 FILER NAME <b>Lisa L. Birkman</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>5/8/05</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>C. H. Crossley</b> 6 Contributor address; City; State; Zip Code <b>P. O. Box 117 Round Rock, TX 78680</b>	7 Amount of contribution (\$) <b>200.00</b>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>5/8/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>HDR Professional PAC</b> Contributor address; City; State; Zip Code <b>4401 West Gate Blvd., #400 Austin, TX 78745</b>	Amount of contribution (\$) <b>1,000.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>5/31/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Turner, Collie, &amp; Braden PAC</b> Contributor address; City; State; Zip Code <b>P. O. Box 130089 Houston, TX 77219</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>5/31/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Pat Berryman</b> Contributor address; City; State; Zip Code <b>206 Champions Dr. Georgetown, TX 78628</b>	Amount of contribution (\$) <b>100.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>6/9/05</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Raba-Kistner PAC</b> Contributor address; City; State; Zip Code <b>8200 Cameron Rd, Ste C-154 Austin, TX 78754</b>	Amount of contribution (\$) <b>250.00</b>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> Total pages Schedule F: <b>6</b>
<b>2</b> FILER NAME <b>Lisa L. Birkman</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)
<b>4</b> Date <b>1/14/05</b>	<b>5</b> Payee name <b>Document Engine</b> ..... <b>6</b> Payee address; City; State; Zip Code <b>2701 Gattis School Rd, #103B</b> <b>Round Rock, TX 78664</b>	<b>7</b> Amount (\$)  <b>254.39</b>
<b>8</b> Purpose of payment (See instructions regarding type of information required.) <b>Printing of stationery/stickers</b>		<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>2/5/05</b>	Payee name <b>Brushy Creek MUD</b> ..... Payee address; City; State; Zip Code <b>16318 Great Oaks Dr.</b> <b>Round Rock, TX 78681</b>	Amount (\$)  <b>50.00</b>
Purpose of payment (See instructions regarding type of information required.) <b>Deposit for rental of community center</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>2/23/05</b>	Payee name <b>B's Gathering House</b> ..... Payee address; City; State; Zip Code <b>106 W. Bagdad St.</b> <b>Round Rock, TX 78664</b>	Amount (\$)  <b>200.00</b>
Purpose of payment (See instructions regarding type of information required.) <b>Deposit on facility rental for reception</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>2/28/05</b>	Payee name <b>Julie Bassett</b> ..... Payee address; City; State; Zip Code <b>17061 Conway Springs</b> <b>Austin, TX 78717</b>	Amount (\$)  <b>141.95</b>
Purpose of payment (See instructions regarding type of information required.) <b>Website hosting and services</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The **INSTRUCTION GUIDE** explains how to complete this form. 1 Total pages Schedule F: **6**

2 **FILER NAME** 3 **ACCOUNT #** (Ethics Commission filers)  
 Lisa L. Birkman

<b>4</b> Date	<b>5</b> Payee name	<b>7</b> Amount (\$)
3/8/05	Virginia Birkman	545.00
	<b>6</b> Payee address; City; State; Zip Code 16917 Judy Scholl Way Round Rock, TX 78681	

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Office supplies for printing	<b>9</b> <b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b>	<b>Payee name</b>	<b>Amount (\$)</b>
3/21/05	Virginia Birkman	125.00
	<b>Payee address; City; State; Zip Code</b> 16917 Judy Scholl Way Round Rock, TX 78681	

<b>Purpose of payment</b> (See instructions regarding type of information required.) Printing and mailing	<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b>	<b>Payee name</b>	<b>Amount (\$)</b>
3/30/05	B's Gathering House	816.81
	<b>Payee address; City; State; Zip Code</b> 106 W. Bagdad St. Round Rock, TX 78664	

<b>Purpose of payment</b> (See instructions regarding type of information required.) Rental of facility	<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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<b>Date</b>	<b>Payee name</b>	<b>Amount (\$)</b>
4/9/05	Sam's Club	304.61
	<b>Payee address; City; State; Zip Code</b> 130 Sundance Pkwy, #300 Round Rock, TX 78681	

<b>Purpose of payment</b> (See instructions regarding type of information required.) Beverages for fundraiser	<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The **INSTRUCTION GUIDE** explains how to complete this form. **1** Total pages Schedule F: **6**

**2** FILER NAME **Lisa L. Birkman** **3** ACCOUNT # (Ethics Commission filers)

<b>4</b> Date 4/11/05	<b>5</b> Payee name Williamson County Republican Women <b>6</b> Payee address; City; State; Zip Code P. O. Box 342 Round Rock, TX 78680	<b>7</b> Amount (\$) 36.00
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Luncheon	<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 4/16/05	Payee name Garden Ridge Payee address; City; State; Zip Code 2800 S. IH 35 Round Rock, TX 78681	Amount (\$) 68.59
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Purpose of payment (See instructions regarding type of information required.) Decorations for float	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 4/18/05	Payee name Rick Birkman Payee address; City; State; Zip Code 16917 Judy Scholl Way Round Rock, TX 78681	Amount (\$) 5,000.00
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Purpose of payment (See instructions regarding type of information required.) Repayment of loan.	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 4/21/05	Payee name Georgetown Chamber of Commerce Payee address; City; State; Zip Code P. O. Box 346 Georgetown, TX 78627	Amount (\$) 83.30
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Purpose of payment (See instructions regarding type of information required.) Membership dues	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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# POLITICAL EXPENDITURES

# SCHEDULE F

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> Total pages Schedule F: <b>6</b>
<b>2</b> FILER NAME <b>Lisa L. Birkman</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)
<b>4</b> Date <b>5/4/05</b>	<b>5</b> Payee name <b>Document Engine</b> ----- <b>6</b> Payee address; City; State; Zip Code <b>2701 Gattis School Rd #103 B</b> <b>Round Rock, TX 78664</b>	<b>7</b> Amount (\$)  <b>140.00</b>
<b>8</b> Purpose of payment (See instructions regarding type of information required.) <b>Printing of note cards.</b>		<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>5/9/05</b>	Payee name <b>Williamson County Republican Women</b> ----- Payee address; City; State; Zip Code <b>P. O. Box 342</b> <b>Round Rock, TX 78680</b>	Amount (\$)  <b>252.00</b>
Purpose of payment (See instructions regarding type of information required.) <b>Luncheons</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>5/16/05</b>	Payee name <b>Rick Birkman</b> ----- Payee address; City; State; Zip Code <b>16917 Judy Scholl Way</b> <b>Round Rock, TX 78680</b>	Amount (\$)  <b>3,550.00</b>
Purpose of payment (See instructions regarding type of information required.) <b>Repayment of loan</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>5/22/05</b>	Payee name <b>W Club PAC</b> ----- Payee address; City; State; Zip Code <b>P. O. Box 393</b> <b>Round Rock, TX 78680</b>	Amount (\$)  <b>500.00</b>
Purpose of payment (See instructions regarding type of information required.) <b>Donation</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: <b>6</b>
<b>2</b> FILER NAME <b>Lisa L. Birkman</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)
<b>4</b> Date <b>6/21/05</b>	<b>5</b> Payee name <b>Round Rock Chamber of Commerce</b> ..... <b>6</b> Payee address; City; State; Zip Code <b>212 E. Main St.</b> <b>Round Rock, TX 78664</b>	<b>7</b> Amount (\$)  <b>30.00</b>
<b>8</b> Purpose of payment (See instructions regarding type of information required.) <b>Membership luncheon</b>		<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>6/21/05</b>	Payee name <b>Georgetown Area Republican Women PAC</b> ..... Payee address; City; State; Zip Code <b>4500 Williams Dr. #212-PMB 267</b> <b>Georgetown, TX 78628</b>	Amount (\$)  <b>60.00</b>
Purpose of payment (See instructions regarding type of information required.) <b>Contribution to scholarship fund</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date <b>6/21/05</b>	Payee name <b>Debra Higginbotham</b> ..... Payee address; City; State; Zip Code <b>1913 Terry Lane</b> <b>Georgetown, TX 78628</b>	Amount (\$)  <b>30.00</b>
Purpose of payment (See instructions regarding type of information required.) <b>Reimbursement for tix to GRW luncheon.</b>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date	Payee name ..... Payee address; City; State; Zip Code	Amount (\$)
Purpose of payment (See instructions regarding type of information required.)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
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# POLITICAL EXPENDITURES

# SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form. **1** Total pages Schedule F: **6**

**2** FILER NAME **Lisa L. Birkman** **3** ACCOUNT # (Ethics Commission filers)

<b>4</b> Date 5/23/05	<b>5</b> Payee name Williamson County Republican Party W Club	<b>7</b> Amount (\$) 25.00
<b>6</b> Payee address; City; State; Zip Code P. O. Box 393 Round Rock, TX 78680		

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Membership dues	<b>9</b> <b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held
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Date 6/10/05	Payee name Round Rock Chamber of Commerce	Amount (\$) 100.00
Payee address; City; State; Zip Code 212 E. Main St. Round Rock, TX 78664		

Purpose of payment (See instructions regarding type of information required.) Membership dues	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
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Date 6/17/05	Payee name 100 Club of Central Texas	Amount (\$) 100.00
Payee address; City; State; Zip Code P. O. Box 10126 Austin, TX 78766		

Purpose of payment (See instructions regarding type of information required.) Membership	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
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Date 6/20/05	Payee name Dennis Quaid Charity Weekend	Amount (\$) 250.00
Payee address; City; State; Zip Code 4314 W. Braker Ln. #250 Austin, TX 78759		

Purpose of payment (See instructions regarding type of information required.) Tickets to several events.	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
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