

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8249

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT #
(Ethics Commission filers)
00008056

2 PAGE #
1 of 93

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Ms. Brigid
NICKNAME LAST SUFFIX
Shea

OFFICE USE ONLY

Date Received
2014 JAN 15 PM 4:31
Date Hand-delivered or Date Postmarked
Receipt # Amount
Date Processed
Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2604 Geraghty Ave.
Austin, TX 78757

Change of Address

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Ms. Dawn
NICKNAME LAST SUFFIX
Lewis

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
4509 Edgemont Dr.
Austin, TX 78731

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 467-0452

8 REPORT TYPE

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

9 PERIOD
COVERED

Month Day Year Month Day Year
07/01/2013 THROUGH 12/31/2013

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
03/04/2014

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

County Commissioner, Pct 2

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Shea, Brigid (Ms.)	14 ACCOUNT # (Ethics Commission filers) 00008056
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15 NOTICE FROM POLITICAL COMMITTEE(S)

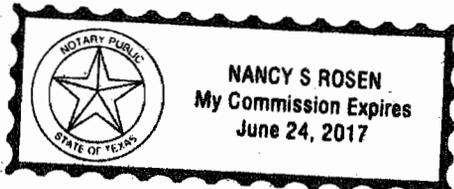
.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they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

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

additional pages

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 2,271.21
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 115,015.06
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 1,975.18
	4. TOTAL POLITICAL EXPENDITURES	\$ 97,871.35
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 86,225.07
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 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.

Brigid Shea

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

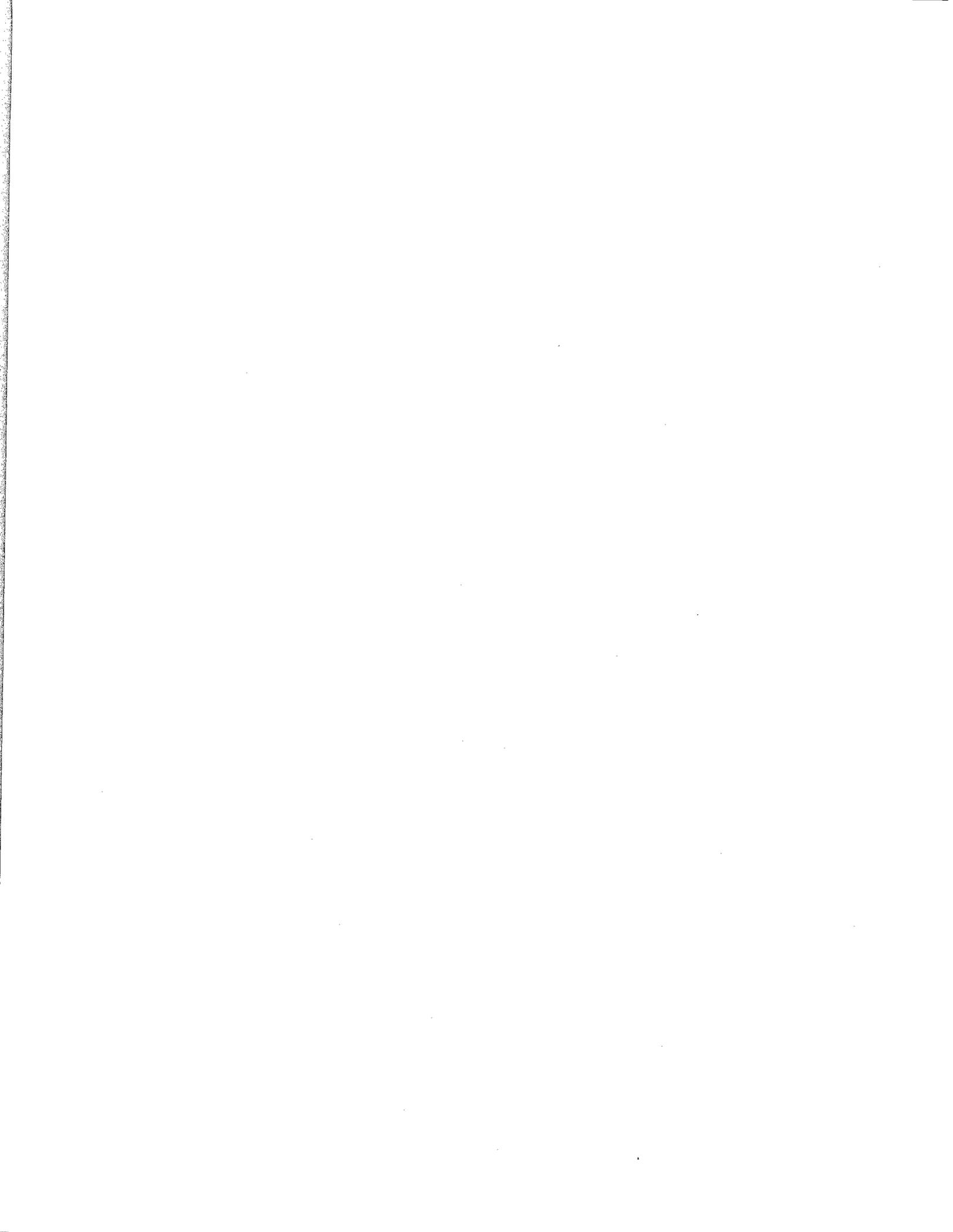
Sworn to and subscribed before me, by the said Brigid Shea, this the 15 day of January, 2014, to certify which, witness my hand and seal of office.

<i>Nancy S Rosen</i> Signature of officer administering oath	Nancy S Rosen Print name of officer administering oath	Private Client Banker Title of officer administering oath
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/54 Report: 3/93	
2 FILER NAME: Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/23/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aaker, Bob Armstrong & Linda 6 Contributor address; City; State; Zip Code 6204 Shadow Mountain Cv Austin, TX 78731	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
4 Date 12/21/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abbot, Stephen 6 Contributor address; City; State; Zip Code 2703 Bonnie Rd Austin, TX 78703	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) IBM	
4 Date 12/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abell, Hill 6 Contributor address; City; State; Zip Code 1607 Kerr St Austin, TX 78704	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Bicycle Sport Shop	
4 Date 12/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ahern, Linda and Mark 6 Contributor address; City; State; Zip Code 302 Park Ln Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Property manager		Employer (See Instructions) Property manager	
4 Date 12/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ahern, Linda and Mark 6 Contributor address; City; State; Zip Code 302 Park Ln Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Property manager		Employer (See Instructions) Self-employed	



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/54 Report: 4/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/23/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# <u>C00011114</u>) American Federation of State, County and Municipal Employees - PEOPLE 6 Contributor address; City; State; Zip Code 1625 L St NW Washington, DC 20036	7 Amount of contribution (\$) \$5,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 12/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, James Contributor address; City; State; Zip Code 1213 W 12th St Austin, TX 78703	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retail		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Anderson's Coffee Company			
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Lee Contributor address; City; State; Zip Code 10233 Snapdragon Dr Austin, TX 78739	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Certified Public Accountant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self-employed			
Date 12/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andre, Sarah Contributor address; City; State; Zip Code 702 San Antonio St Austin, TX 78701	Amount of contribution (\$) \$900.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Development Consultant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self-employed			
Date 12/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armbrust, David Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300 Austin, TX 78701	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Partner		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Armbrust and Brown, PLLC			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/54 Report: 6/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/26/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barrera, Louis Rene 6 Contributor address; City; State; Zip Code 6808 Lost Vly Austin, TX 78745	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Natural Resources Land Manager		10 Employer (See Instructions) City of Austin	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beall, Jon Contributor address; City; State; Zip Code 2503 Flora Cv Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) HCC		Employer (See Instructions) Volunteer	
Date 10/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beasley, Roger Contributor address; City; State; Zip Code 6503 Santolina Cv Austin, TX 78731	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Roger Beasley Mazda	
Date 11/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beck, Ken Contributor address; City; State; Zip Code 15911 Booth Cir Leander, TX 78641	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bellocchio, Brenda Lee Contributor address; City; State; Zip Code 905 Robert E Lee Rd Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self-employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/54 Report: 7/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bender, Hugh and Cassandra 6 Contributor address; City; State; Zip Code 802 Harris Ave Austin, TX 78705	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) GIS Consulting		10 Employer (See Instructions) 3cGeo	
Date 12/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bintliff, David Contributor address; City; State; Zip Code 6303 Danwood Dr Austin, TX 78759	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Austin area AFL-CIO	
Date 12/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blair, Ginger Contributor address; City; State; Zip Code 1506 Ben Crenshaw Way Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blizzard, Karen Contributor address; City; State; Zip Code 2100 Southern Oaks Dr Austin, TX 78745	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Assistant Director of Interpretive Services		Employer (See Instructions) Texas Parks and Wildlife Department	
Date 10/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bonner, Cathy Contributor address; City; State; Zip Code 4303 Canyonside Trl Austin, TX 78731	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Chair of Board		Employer (See Instructions) Service King	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/54 Report: 8/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bornstein, Sue 6 Contributor address; City; State; Zip Code 909 Post Oak St Austin, TX 78704	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Doctor		10 Employer (See Instructions) Self-employed	
Date 12/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bourgeois, Greg Contributor address; City; State; Zip Code 3825 Lake Austin Blvd Ste. 403 Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self-employed	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Broaddus, James Contributor address; City; State; Zip Code 605 Rainbow Cv West Lake Hills, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Broaddus and Associates	
Date 11/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Suzee Contributor address; City; State; Zip Code 4900 Avenue H Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) The Gill Agency	
Date 12/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Suzee Contributor address; City; State; Zip Code 4900 Avenue H Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) The Gill Agency	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/54 Report: 9/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 11/08/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Bick 6 Contributor address; City; State; Zip Code 4208 Shoalwood Austin, TX 78756	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Hyde Park Bar and Grill	
11/07/2013	Brown, Charley Contributor address; City; State; Zip Code 3624 N Hills Dr Austin, TX 78731	\$100.00	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Charles R. Brown and Company, PC	
12/31/2013	Bruno, Joseph Contributor address; City; State; Zip Code 2006 Goodrich Ave Austin, TX 78704	\$100.00	
Principal occupation / Job title (See Instructions) Founder/director		Employer (See Instructions) Parkside Community School	
09/08/2013	Bryarly, Richard Contributor address; City; State; Zip Code 5800 Harrington Cv Austin, TX 78731	\$50.00	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Austin Diagnositc Clinic	
12/20/2013	Bryarly, Richard Contributor address; City; State; Zip Code 5800 Harrington Cv Austin, TX 78731	\$100.00	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Austin Diagnositc Clinic	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/54 Report: 10/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burton, Amon 6 Contributor address; City; State; Zip Code 4200 Avenue G Austin, TX 78751	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self-employed	
Date 12/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Camp, Jim Contributor address; City; State; Zip Code 3803 Cattleman Dr Manchaca, TX 78652	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Sr. Specialist		Employer (See Instructions) Macmillan Higher Education	
Date 11/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Cari Contributor address; City; State; Zip Code 5325 Tortuga Trl Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Amelia Bullock Realtors	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clarke, Margot Contributor address; City; State; Zip Code 5106 Evergreen Ct Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Contract researcher & writer		Employer (See Instructions) Self-employed	
Date 09/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Claunch, David Contributor address; City; State; Zip Code 305 McConnel Dr Austin, TX 78746	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) West Lake Hills, Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/54 Report: 11/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/23/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clements, Andrew	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4528 Ruiz St Austin, TX 78723		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Architect		10 Employer (See Instructions) Texas DSHS	
Date 12/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cohen, Aiden	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4305 Camacho St Austin, TX 78723		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) City of Austin	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Collier-Brown, Carrie	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9517 Bungalow Ln Austin, TX 78749		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winstead, PC	
Date 11/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Corbin, Robert	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 608 Cliff Dr Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Nomadic Notions	
Date 12/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Costello, Betty	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5620 Parade Rdg Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/54 Report: 12/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 09/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cowan, Tommy 6 Contributor address; City; State; Zip Code 1412 Collier St Austin, TX 78704	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Executive Vice President		10 Employer (See Instructions) Texas Society of Architects	
Date 12/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cravens, Paul Contributor address; City; State; Zip Code 8909 N Plaza Ct Austin, TX 78753	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) UT System	
Date 09/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crow, Dan Contributor address; City; State; Zip Code 2803 Down Cv Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael Contributor address; City; State; Zip Code 3307 Bryker Dr Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self-employed	
Date 12/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Dick Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) University of Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/54 Report: 13/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/31/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Dick 6 Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Biologist		10 Employer (See Instructions) University of Texas	
Date 10/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Griffin Contributor address; City; State; Zip Code 2604 Stratford Dr Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) VP Marketing		Employer (See Instructions) Q1Media	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, James Contributor address; City; State; Zip Code 4005 Rockledge Dr Austin, TX 78731	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Health Care		Employer (See Instructions) Seton	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, James Contributor address; City; State; Zip Code 4005 Rockledge Dr Austin, TX 78731	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Health Care		Employer (See Instructions) Seton	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deyoung, Claire Contributor address; City; State; Zip Code PO Box 284236 Austin, TX 78728	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/54 Report: 14/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 10/23/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DiLeo, Michael 6 Contributor address; City; State; Zip Code 9 Niles Rd Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) writer/teacher		10 Employer (See Instructions) Self-employed	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donaldson, David Contributor address; City; State; Zip Code 1722 Bartoncliff Dr Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Dragon Hill Development	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donovan, Brian Contributor address; City; State; Zip Code 508 Genard St Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) National Cooperative Business Association	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Jim Contributor address; City; State; Zip Code 60 Nueces St Austin, TX 78701	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Duncan Associates	
Date 12/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Durst, Phil Contributor address; City; State; Zip Code 4101 Avenue C Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Deats Durst Owen Levy, PLLC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/54 Report: 15/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 09/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dwyer, Sister Jean Thomas 6 Contributor address; City; State; Zip Code 5803 Fairlane Dr Austin, TX 78757	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Medical Professional		10 Employer (See Instructions) Seton	
Date 09/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dyer, Herb Contributor address; City; State; Zip Code 3803 Kenora Ct Austin, TX 78738	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Healthcare Professional		Employer (See Instructions) Seton	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, Carol Contributor address; City; State; Zip Code 2702 Pegram Ave Austin, TX 78757	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 11/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellison, Chris Contributor address; City; State; Zip Code 2500 Flora Cv Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas San Antonio	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Engelhardt-Cronk, Kathryn & Tom Contributor address; City; State; Zip Code 2406 Westover Rd Austin, TX 78703	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Community TechKnowledge, Inc.	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/54 Report: 16/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Espey, William 6 Contributor address; City; State; Zip Code 4801 Southwest Pkwy Austin, TX 78735	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) RPSEspey	
Date 12/03/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Etheredge, Eddy Contributor address; City; State; Zip Code 30 Stageline Dr Austin, TX 78640	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Lockwood, Andrews & Newnam	
Date 11/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Farrell, Thom Contributor address; City; State; Zip Code 3223 Park Hills Dr Rollingwood, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self-employed	
Date 11/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fath, Shudde Contributor address; City; State; Zip Code 1005 Bluebonnet Ln Austin, TX 78704	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Feazell, Vic Contributor address; City; State; Zip Code 11503 Circle Bend Dr Austin, TX 78758	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vic Feazell, PC	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/31/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferchill, Cary 6 Contributor address; City; State; Zip Code 2524 Tanglewood Trl Austin, TX 78703	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Lawyer		10 Employer (See Instructions) Self-employed	
Date 10/02/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fine, Janice Contributor address; City; State; Zip Code 315 Nassau St Princeton, NJ 8540	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rutgers University	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fleming, Helen Contributor address; City; State; Zip Code 1712 E Riverside Dr Austin, TX 78741	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A	
Date 09/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Forrest, Hugh Contributor address; City; State; Zip Code 703 E 50th St #B Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Event planner		Employer (See Instructions) SXSW	
Date 12/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Forrest, Hugh Contributor address; City; State; Zip Code 703 E 50th St #B Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Event planner		Employer (See Instructions) SXSW	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/26/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Foster, David and Virginia 6 Contributor address; City; State; Zip Code 1902 Forestglade Dr Austin, TX 78745	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Texas State Director		10 Employer (See Instructions) Clean Water Action	
Date 10/03/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fox, Marilyn Contributor address; City; State; Zip Code 6400 Zadock Woods Dr Austin, TX 78749	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Fox, Smolen & Associates, Inc.	
Date 11/05/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frederick, David Contributor address; City; State; Zip Code 414 Ridgewood Rd Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lowerre, Frederick, Perales, Allmon & Rockwell	
Date 12/03/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friday, Jr., Philip Contributor address; City; State; Zip Code 1100 Guadalupe St Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Friday Lawyers	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gage, Les and Winnie Contributor address; City; State; Zip Code PO Box 5816 Austin, TX 78763	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 09/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gallagher, Thomas 6 Contributor address; City; State; Zip Code 801 W 6th St Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Healthcare		10 Employer (See Instructions) Seton Professional	
Date 12/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, Bill Contributor address; City; State; Zip Code 3704 zyle Rd austin, TX 78737	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney/Member		Employer (See Instructions) Gammon Law Office, PLLC	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Angela Contributor address; City; State; Zip Code 1510 Rockland Dr Austin, TX 78748	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A	
Date 12/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gere, Wesley Contributor address; City; State; Zip Code 10403 Grand Oak Dr Austin, TX 78750	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) BMC Software	
Date 12/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Getter, Kerry Contributor address; City; State; Zip Code 9301 Johnny Morris Rd Austin, TX 78724	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Balcones Resources	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/31/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilbert, Lizan & Bob	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4212 Bellvue Ave Austin, TX 78756		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) University of Texas	
Date 09/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gladish, Kenneth	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6703 Mesa Dr Austin, TX 78731-2817		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Medical Professional		Employer (See Instructions) Seton	
Date 11/05/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Glover, Dale	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 115 Sandra Muraida Way #616 Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) commercial real estate		Employer (See Instructions) Self-employed-employed	
Date 10/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Godfrey, Grant	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3921 Oliver St Hyattsville, MD 20782		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) NDI	
Date 10/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goodrich, Ray	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1404 Redbud Trl Austin, TX 78746		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Ann S 6 Contributor address; City; State; Zip Code 3815 Avenue H Austin, TX 78751	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Arts Administrator		10 Employer (See Instructions) Self-employed-employed	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Lawrence Contributor address; City; State; Zip Code 5909 Bull Creek Rd Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Regulatory Affairs		Employer (See Instructions) Texas Gas Service	
Date 10/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, Robert Contributor address; City; State; Zip Code 2939 Westlake Cv Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Texas Disposal Systems	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, Robert Contributor address; City; State; Zip Code 2939 Westlake Cv Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Texas Disposal Systems	
Date 12/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gurasich, Bill Contributor address; City; State; Zip Code 3813 Travis Country Cir Austin, TX 78735	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Stoney Ridge Development, GSD&M	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 08/12/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hadden, Karen	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 605 Carismatic Ln Austin, TX 78748		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Environmental Organization Director		10 Employer (See Instructions) SEED Coalition	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haenn, Meg	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 901 Longview Cir Dripping Springs, TX 78620		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) National Wildlife Federation	
Date 12/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hale, Bryan	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1300 Windsor Rd Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) SACHEM, Inc.	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Jerry	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Husch Blackwell Real Estate	
Date 12/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, Greg	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3307 Winding Creek Dr Austin, TX 78735		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Healthcare Executive		Employer (See Instructions) Seton Healthcare Family	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 10/05/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harwell, Carol & Richard 6 Contributor address; City; State; Zip Code 801 S Walnut St Georgetown, TX 78626	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Manager		10 Employer (See Instructions) Austin Energy	
Date 12/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatch, Thomas Contributor address; City; State; Zip Code 1102 E 8th St Austin, TX 78702	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Huo Architects	
Date 09/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henderson, Kate Contributor address; City; State; Zip Code 5803 Tom Wooten Cv Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Healthcare Professional		Employer (See Instructions) Seton	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henderson, Thomas Contributor address; City; State; Zip Code PO Box 1415 austin, TX 78767	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 10/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Robert Contributor address; City; State; Zip Code 1602 Glencrest Dr Austin, TX 78723	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Seda France, Inc.	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 08/15/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudkins, Mike	7 Amount of contribution (\$) \$3,000.00	8 In-kind contribution description (if applicable) In-kind: office furniture
6 Contributor address; City; State; Zip Code 1300 E 5th St Austin, TX 78702		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) General Manager		10 Employer (See Instructions) Texas Office Products	
Date 08/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudkins, Mike	Amount of contribution (\$) \$518.15	In-kind contribution description (if applicable) In-kind: office supplies
Contributor address; City; State; Zip Code 1300 E 5th St Austin, TX 78702		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Texas Office Products	
Date 10/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudkins, Mike	Amount of contribution (\$) \$15.70	In-kind contribution description (if applicable) In-kind: office supplies
Contributor address; City; State; Zip Code 1300 E 5th St Austin, TX 78702		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Texas Office Products	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hulting, Jane	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8130 Cedar Rd Elkins Park, PA 19027		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self-employed	
Date 12/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hutchinson, Janet	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2602 Cavileer Ave Austin, TX 78757		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Fundraiser		Employer (See Instructions) Red Cross	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jackson, Rachel 6 Contributor address; City; State; Zip Code 6208 Augusta National Dr Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Sales		10 Employer (See Instructions) Blackbaud	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jacobson, Mitch Contributor address; City; State; Zip Code 2107 Bridle Path Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) University of Texas	
Date 11/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Melissa Contributor address; City; State; Zip Code 1203a Elm St Austin, TX 78703	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Community volunteer		Employer (See Instructions) N/A	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Tyler Contributor address; City; State; Zip Code 12345 Lamplight Village Ave #1126 Austin, TX 78758	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) URS Corporation	
Date 12/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Juday, Jennifer Contributor address; City; State; Zip Code 4209 Dauphine Dr Austin, TX 78727	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) HR Manager		Employer (See Instructions) Baxter Healthcare	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 09/26/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kane, James and Leslie 6 Contributor address; City; State; Zip Code PO Box 177 Driftwood, TX 78619	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Financial Consultant		10 Employer (See Instructions) Bridgepoint Consulting, LLC	
Date 12/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kapner, Mark Contributor address; City; State; Zip Code 4303 Wildridge Cir Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self-employed	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelso, Barbara Contributor address; City; State; Zip Code 8869 Mountain Ridge Cir Austin, TX 78759	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Kelso Consultants	
Date 09/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keys, Jerry Contributor address; City; State; Zip Code 2310 Tower Dr Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Matheson Keys & Kordzik PLLC	
Date 10/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kilbourne, David Contributor address; City; State; Zip Code 5228 McCormick Mountain Dr Austin, TX 78734	Amount of contribution (\$) \$55.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-employed employed	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kilcrease, Worth & Laura 6 Contributor address; City; State; Zip Code 7504 Clove Cv Austin, TX 78750	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Investor		10 Employer (See Instructions) Triton ventures	
Date 11/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kincaid, Mark Contributor address; City; State; Zip Code 3302 Glen Rose Dr Austin, TX 78731	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) George Brothers Kincaid & Horton LLP	
Date 12/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kincaid, Mark Contributor address; City; State; Zip Code 3302 Glen Rose Dr Austin, TX 78731	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) George Brothers Kincaid & Horton LLP	
Date 10/02/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Dana Contributor address; City; State; Zip Code 420 Santa Alicia Solana Beach, CA 92075	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Liquid Environmental Solutions	
Date 12/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Robert Contributor address; City; State; Zip Code 4212 Park Hollow Ct Austin, TX 78746	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Good Company Associates	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/54 Report: 28/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 11/14/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Koitzsch, Adriana 6 Contributor address; City; State; Zip Code 3514 Enfield Austin, TX 78703	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) President/ Director		10 Employer (See Instructions) Arcon Architectural Construction Products Inc	
Date 12/03/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kralj, Elliot Contributor address; City; State; Zip Code 3809 Gaines Ct Austin, TX 78735	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Kralj Consulting	
Date 12/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kralj, Elliot Contributor address; City; State; Zip Code 3809 Gaines Ct Austin, TX 78735	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Kralj Consulting	
Date 11/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kramer, Diane Contributor address; City; State; Zip Code 4204 Sinclair Ave Austin, TX 78756-3527	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kramer, Diane Contributor address; City; State; Zip Code 4204 Sinclair Ave Austin, TX 78756-3527	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/54 Report: 29/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 09/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lallo, Adrienne	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7504 Stonecliff Dr Austin, TX 78731		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Healthcare Professional		10 Employer (See Instructions) Seton	
Date 10/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lehman, Chris	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1914 Larchmont Dr Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real Estate Appraiser		Employer (See Instructions) Self-employed	
Date 10/02/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leib, Richard and Sharon	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 455 Barbara Ave Solana Beach, CA 92075		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Liquid Environmental Solutions	
Date 10/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Levinson, Cynthia	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3410 Windsor Rd Austin, TX 78703		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-employed	
Date 12/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Limon, Joe	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1801 Corona Dr Austin, TX 78723		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Battalion Chief		Employer (See Instructions) City of Austin Fire Department	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 11/09/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lincoln, Anna 6 Contributor address; City; State; Zip Code Po Box 244 Palisade, CO 81526	7 Amount of contribution (\$) \$75.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Ecologist		10 Employer (See Instructions) Bureau of Land Management	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linebarger Goggan Blair & Sampson Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Littlefield, Mark Contributor address; City; State; Zip Code 7705 Vail Valley Dr Austin, TX 78749	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Littlefield Consulting	
Date 11/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Littlefield Consulting Contributor address; City; State; Zip Code PO Box 90591 Austin, TX 78709	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable) In-kind: poll
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Locke, Jere Contributor address; City; State; Zip Code PO Box 40637 Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) TCEC	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/09/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Longley, Susan 6 Contributor address; City; State; Zip Code 606 W Lynn St 23 Austin, TX 78703	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Fundraiser		10 Employer (See Instructions) The Longley Group	
Date 11/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorenz, Perry Contributor address; City; State; Zip Code 1311-A E 6th St Austin, TX 78702	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Self-employed	
Date 08/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MacFarlane, Andrew Contributor address; City; State; Zip Code 9515 Longvale Austin, TX 78729	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Data Foundry	
Date 12/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Hilbert Contributor address; City; State; Zip Code 3304 Vintage Dr Round Rock, TX 78664	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Restaurant Manager		Employer (See Instructions) Hill-berts	
Date 10/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mangan, Andrew Contributor address; City; State; Zip Code 1600 Barton Springs Rd #3604 Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) United States Business Council for Sustainable Development	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 10/28/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mangan, Andrew 6 Contributor address; City; State; Zip Code 1600 Barton Springs Rd #3604 Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Business		10 Employer (See Instructions) United States Business Council for Sustainable Development	
Date 10/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Jack Contributor address; City; State; Zip Code 4126 Westlake Dr Austin, TX 78746	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Public Strategies Inc.	
Date 12/02/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Jack Contributor address; City; State; Zip Code 4126 Westlake Dr Austin, TX 78746	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Public Strategies Inc.	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Patty Contributor address; City; State; Zip Code 6305 Walebridge Ln Austin, TX 78739	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Austin ISD	
Date 11/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Hilda Contributor address; City; State; Zip Code 11503 Wiginton Dr Austin, TX 78758	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mathis, Mary Nell 6 Contributor address; City; State; Zip Code 6300 Mercedes Bnd Austin, TX 78759	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Business owner		10 Employer (See Instructions) Self-employed	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McAfee, Mark Contributor address; City; State; Zip Code 2602 Rae Dell Ave Austin, TX 78704	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Food Service		Employer (See Instructions) Self-employed	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McAfee, Melanie Contributor address; City; State; Zip Code 1170 Ridgeway Dr Austin, TX 78702	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Special Events		Employer (See Instructions) Barr Mansion	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCann, Jana Contributor address; City; State; Zip Code 4000 Pinckney St Austin, TX 78723	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) McCann Adams Studio	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 32/54 Report: 34/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 08/16/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCracken, Brewster 6 Contributor address; City; State; Zip Code 4209 Prickly Pear Dr Austin, TX 78731	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Researcher		10 Employer (See Instructions) Pecan Street Inc.	
4 Date 09/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIntyre, Frances 6 Contributor address; City; State; Zip Code 6305 Treadwell Blvd Austin, TX 78757	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Real Estate Broker/Owner		10 Employer (See Instructions) Frances McIntyre Realtors, Inc.	
4 Date 12/08/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIntyre, Frances 6 Contributor address; City; State; Zip Code 6305 Treadwell Blvd Austin, TX 78757	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Real Estate Broker/Owner		10 Employer (See Instructions) Frances McIntyre Realtors, Inc.	
4 Date 12/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKinnerney, John 6 Contributor address; City; State; Zip Code 1111 W 11th St Austin, TX 78703	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Partner		10 Employer (See Instructions) Castle Hill Partners	
4 Date 10/15/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLellan, Bill 6 Contributor address; City; State; Zip Code 11 Sundown Pkwy Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Chief Development Officer		10 Employer (See Instructions) Family Eldercare	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 11/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McRae, Pete 6 Contributor address; City; State; Zip Code 2313 Lake Austin Blvd Austin, TX 78703	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Pete McRae & Associates	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McRae, Pete Contributor address; City; State; Zip Code 2313 Lake Austin Blvd Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Pete McRae & Associates	
Date 12/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mendoza, Rosie Contributor address; City; State; Zip Code 2512 S Interstate Highway 35 Austin, TX 78704	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) R. Mendoza & Co. P.C.	
Date 09/06/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mikhail, Sam Contributor address; City; State; Zip Code 305 Lowell Ln Austin, TX 78733	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner, Investment Banker		Employer (See Instructions) Mikhail Investments	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Skeeter Contributor address; City; State; Zip Code 512 E. Riverside Drive STE 200 Austin, TX 78704	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner/President		Employer (See Instructions) The County Line, Inc.	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/07/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Milne, Robert 6 Contributor address; City; State; Zip Code 3916 Knollwood Dr Austin, TX 78731	7 Amount of contribution (\$) \$35.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Self-employed	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Milne, Robert Contributor address; City; State; Zip Code 3916 Knollwood Dr Austin, TX 78731	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Minton, Burton, Bassett & Collins PC Contributor address; City; State; Zip Code 1100 Guadalupe St Austin Austin, TX 78701	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Owners		Employer (See Instructions) Minton, Burton, Bassett & Collins P.C.	
Date 11/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, Bill Contributor address; City; State; Zip Code 1004 Jousting Pl Austin, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) King Engineering	
Date 10/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Hope Contributor address; City; State; Zip Code 8108 Asmara Dr Austin, TX 78750	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 10/29/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Susan 6 Contributor address; City; State; Zip Code 4205 Ramsey Ave Austin, TX 78756-3512	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Fowler Law Firm	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mossman, Nancy Contributor address; City; State; Zip Code 4004 Silverspring Dr Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Reverend, Volunteer Ministries Coordinator		Employer (See Instructions) Presbyterian Children's Homes and Services	
Date 08/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mueller, Liz Contributor address; City; State; Zip Code 3213 French Pl Austin, TX 78722	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas	
Date 12/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Muir, Rachel Contributor address; City; State; Zip Code 4905 W Frances Pl Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Fundraising consultant		Employer (See Instructions) Self-employed	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nassour, Jimmy Contributor address; City; State; Zip Code 4517 Grand Cypress Dr Austin, TX 78747	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 10/25/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Notzon, Robert and Mary Ann 6 Contributor address; City; State; Zip Code 509 W 16th St Austin, TX 78701	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self-employed	
Date 10/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nyfeler, John Contributor address; City; State; Zip Code 3215 Hampton Rd Auystin, TX 78705	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) The Nyfeler Organization, Inc.	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Petievich, Carla Contributor address; City; State; Zip Code 5329 Western Hills Dr Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Hoshyar Foundation	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pruett, Dan Contributor address; City; State; Zip Code 6306 Clairmont Dr Austin, TX 78749	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Meals on Wheels	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randolph, Ian Contributor address; City; State; Zip Code 1309 Concho St Austin, TX 78702	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Premier Legislative Consulting	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 11/11/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reagan, Billy 6 Contributor address; City; State; Zip Code 1775 Warm Springs Rd Salt Lake City, UT 84116	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Business Owner		10 Employer (See Instructions) Reagan Signs	
Date 09/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Pam Contributor address; City; State; Zip Code 3511 Westlake Dr Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Philanthropist		Employer (See Instructions) N/A	
Date 10/02/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reilly, Patrick Contributor address; City; State; Zip Code 11714 Alderhill Ter San Diego, CA 92131	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Liquid Environmental Solutions	
Date 12/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reis, Brian Contributor address; City; State; Zip Code 6516 Rotan Dr Austin, TX 78749	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) RPS Espey	
Date 10/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reynolds, Joseph Contributor address; City; State; Zip Code 2611 W 49th St Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/54 Report: 41/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/21/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richards, Dave 6 Contributor address; City; State; Zip Code 816 Congress Ave suite 1200 Austin, TX 78701	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self-employed	
Date 11/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richmond, Karin Contributor address; City; State; Zip Code 1343 Spyglass Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Intelligent Incentives Inc	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rittenhouse, Margaret Contributor address; City; State; Zip Code 915 Ken St Austin, TX 78758	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Accounting Manager		Employer (See Instructions) The Khabele School	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rittenhouse, Margaret Contributor address; City; State; Zip Code 915 Ken St Austin, TX 78758	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Accounting Manager		Employer (See Instructions) The Khabele School	
Date 09/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Scott Contributor address; City; State; Zip Code PO Box 311 Driftwood, TX 78619	Amount of contribution (\$) \$6,680.00	In-kind contribution description (if applicable) In-kind: fundraising event catering
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Salt Lick Barbeque	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/54 Report: 42/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 09/11/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Scott 6 Contributor address; City; State; Zip Code PO Box 311 Driftwood, TX 78619	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Salt Lick Barbeque	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Edward Contributor address; City; State; Zip Code 4400 Ramsey Ave Austin, TX 78756	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) E. James Robinson Architecture, PLLC	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Rhett Contributor address; City; State; Zip Code 3600 Lucas Dr Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) FOL	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 11/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Brian Contributor address; City; State; Zip Code 1112 W 9th St Austin, TX 78703	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate investor		Employer (See Instructions) Rodgers & Reichle, Inc	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 12/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Brian Contributor address; City; State; Zip Code 1112 W 9th St Austin, TX 78703	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate investor		Employer (See Instructions) Rodgers & Reichle, Inc	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 41/54 Report: 43/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 09/08/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogoff, Regina 6 Contributor address; City; State; Zip Code 1705 Schieffer Ave Austin, TX 78722	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) CEO		10 Employer (See Instructions) People's Community Clinic	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogoff, Regina Contributor address; City; State; Zip Code 1705 Schieffer Ave Austin, TX 78722	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) People's Community Clinic	
Date 09/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenthal, Leonard Contributor address; City; State; Zip Code 8313 Franwood Ln Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Pace Americas	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenthal, Leonard Contributor address; City; State; Zip Code 8313 Franwood Ln Austin, TX 78757	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Pace Americas	
Date 12/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roth, Danny Contributor address; City; State; Zip Code 1503 Wildcat Holw Austin, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) General Partner		Employer (See Instructions) Southwest Strategies Group	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 42/54 Report: 44/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/31/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rothe, Gail 6 Contributor address; City; State; Zip Code 1705 Margaret St Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Technical Consultant		10 Employer (See Instructions) Parsons	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ruiz, Crispin Contributor address; City; State; Zip Code 408 Whitetail Dr Manchaca, TX 78652	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Group Solutions RJW	
Date 12/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Safady, Edward Contributor address; City; State; Zip Code PO Box 99 Austin, TX 78767	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Prosperity Bank	
Date 11/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salazar, Elaine Contributor address; City; State; Zip Code 1618 Pennsylvania Austin, TX 78702	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ampersand art supply	
Date 12/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sallis, Lance Contributor address; City; State; Zip Code 3105 Crowheart Cv Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) CSE Realty Partners	

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SCHEDULE A

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2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Santis, Rosa 6 Contributor address; City; State; Zip Code 2311 Enfield Rd Austin, TX 78703	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions) Business owner			10 Employer (See Instructions) Pedro SS Services	
Date 12/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scanlan, Nancy Contributor address; City; State; Zip Code 4513 Balcones Dr Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) N/A			Employer (See Instructions) N/A	
Date 12/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scanlon, Maureen Contributor address; City; State; Zip Code 1521 W 30TH St Austin, TX 78703-1403	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) NA			Employer (See Instructions) NA	
Date 12/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schenkkan, Pete Contributor address; City; State; Zip Code 117 Laurel Ln Austin, TX 78705	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Shareholder			Employer (See Instructions) Graves Dougherty Hearon & Moody	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schlosser, Bradley Contributor address; City; State; Zip Code 601 N Lamar Blvd Ste 301 Austin, TX 78703	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) President			Employer (See Instructions) Schlosser development	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schneider, Jan and Harold	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code PO Box 50591 Austin, TX 78763		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions) N/A	
Date 07/02/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schneider, Robin	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4022 Thornton Rd 6 Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Texas Campaign for the Environment	
Date 11/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schneider, Robin	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Texas Campaign for the Environment	
Date 12/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sedwick, Shannon	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 350 King Arthur Ct Austin, TX 78746		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Theater owner		Employer (See Instructions) Self-employed	
Date 12/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Selby, Tom	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2013 N Roosevelt St Arlington, VA 22205		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Williams and Connolly LLP	

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2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 11/04/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sesil, Joe 6 Contributor address; City; State; Zip Code 80 Red River St #317 Austin, TX 78701	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) Deputy PM		10 Employer (See Instructions) MWH	
Date 09/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Bobby Lee Contributor address; City; State; Zip Code PO Box 2115 Austin, TX 78768	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Austin Metal & Iron Company, Inc.	
Date 09/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Ike Contributor address; City; State; Zip Code 2306 Indian Trl Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Austin Iron and Metal	
Date 12/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sittler, Wolf Contributor address; City; State; Zip Code 1403 Kenwood Ave Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) artisan		Employer (See Instructions) Self-employed-employed	
Date 11/05/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smolen, Paul Contributor address; City; State; Zip Code 3812 Cherrywood Rd Austin, TX 78722	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Fox, Smolen & Associates	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 46/54 Report: 48/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/31/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smolen, Paul 6 Contributor address; City; State; Zip Code 3812 Cherrywood Rd Austin, TX 78722	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Fox, Smolen & Associates	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Snyder Pederson, Sue Contributor address; City; State; Zip Code 4710 Roundup Trl Austin, TX 78745	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Clinical social worker		Employer (See Instructions) Living In Connection Counseling PC	
Date 12/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sorrells, Tim Contributor address; City; State; Zip Code 4707 Oakmont Blvd Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Tuggey Group	
Date 11/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speights, Sara Contributor address; City; State; Zip Code 2701 W 49 1/2 St Austin, TX 78731	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 10/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sprute, Michael Osborne & Dana Contributor address; City; State; Zip Code 5109 Turnabout Ln Austin, TX 78731	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Austin Energy	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 47/54 Report: 49/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 10/24/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sprute, Michael Osborne & Dana 6 Contributor address; City; State; Zip Code 5109 Turnabout Ln Austin, TX 78731	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Manager		10 Employer (See Instructions) Austin Energy	
Date 08/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) St. Romain, Malcolm & Beth Contributor address; City; State; Zip Code 2711 Greenlawn Pkwy Austin, TX 78757	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Process Consultant		Employer (See Instructions) Mande Services LLC	
Date 11/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stanford, Blake Contributor address; City; State; Zip Code 4906 Tortuga Pl Austin, TX 78731	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Southwest Human Development	
Date 09/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steiner, Anna Contributor address; City; State; Zip Code 3132 Eanes Cir Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Del Valle High School	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Strover, Sharon Contributor address; City; State; Zip Code 5104 Beverly Skyline Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 48/54 Report: 50/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 11/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swail, Bill 6 Contributor address; City; State; Zip Code 2402 Kathy Cv Austin, TX 78704	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Proprietor		10 Employer (See Instructions) People's Pharmacy	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swan, Laurie Contributor address; City; State; Zip Code 1611 Northwood Rd Austin, TX 78703	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Stratus Properties	
Date 12/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tedder, Jo Karr Contributor address; City; State; Zip Code 1017 Cr 130 Burnet, TX 78611	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Head of Central Texas Water Coalition		Employer (See Instructions) N/A	
Date 09/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Democratic Party Contributor address; City; State; Zip Code 4818 E Ben White Ste 104 Austin, TX 78741	Amount of contribution (\$) \$1,250.00	In-kind contribution description (if applicable) In-kind: voter file access
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/02/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Jeff Contributor address; City; State; Zip Code 401 Black Wolf Run Austin, TX 78738	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) VP Regional director of environmental solutions		Employer (See Instructions) Liquid Environmental Solutions	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 49/54 Report: 51/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/09/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomson, Lee 6 Contributor address; City; State; Zip Code 1300 Yaupon Valley Rd Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 12/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tolleson, Mike Contributor address; City; State; Zip Code 2106 E Martin Luther King Junior Blvd Austin, TX 78702	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed	
Date 12/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis, Patricia Contributor address; City; State; Zip Code 2609 Geraghty Ave Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) private information		Employer (See Instructions) private company	
Date 12/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trusty, Robbin Contributor address; City; State; Zip Code 2630 Barton Hills Dr Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) IT Project Manager		Employer (See Instructions) Austin Energy	
Date 12/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trusty, Robbin Contributor address; City; State; Zip Code 2630 Barton Hills Dr Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) IT Project Manager		Employer (See Instructions) Austin Energy	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 50/54 Report: 52/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/10/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tucker, Davis 6 Contributor address; City; State; Zip Code 1604 Chatham Ave Austin, TX 78723	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Business Owner		10 Employer (See Instructions) Gadroon, LLC	
11 Date 11/22/2013	12 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tulis, Jeffrey 13 Contributor address; City; State; Zip Code 7105 Running Rope Austin, TX 78731	14 Amount of contribution (\$) \$100.00	15 In-kind contribution description (if applicable)
16 Principal occupation / Job title (See Instructions) Professor		17 Employer (See Instructions) University of Texas at Austin	
18 Date 11/13/2013	19 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vale, Kathy 20 Contributor address; City; State; Zip Code 5417 S Mopac Expy #307 Austin, TX 78749	21 Amount of contribution (\$) \$100.00	22 In-kind contribution description (if applicable)
23 Principal occupation / Job title (See Instructions) Air Quality Grants Manager		24 Employer (See Instructions) TCEQ	
25 Date 09/13/2013	26 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Hyfte, Michele 27 Contributor address; City; State; Zip Code 607 Pecan Grove Rd Austin, TX 78704	28 Amount of contribution (\$) \$100.00	29 In-kind contribution description (if applicable)
30 Principal occupation / Job title (See Instructions) Sustainability Director		31 Employer (See Instructions) Seton	
32 Date 12/26/2013	33 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Os and Associates, P.C. 34 Contributor address; City; State; Zip Code 1016 La Posada Dr STE 145 Austin, TX 78752	35 Amount of contribution (\$) \$100.00	36 In-kind contribution description (if applicable)
37 Principal occupation / Job title (See Instructions) Owner and Senior Attorney		38 Employer (See Instructions) David Van Os & Associates	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 51/54 Report: 53/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/29/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Velasquez, Robert 6 Contributor address; City; State; Zip Code 141 fagerquist Rd del valle, TX 78617	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Manager		10 Employer (See Instructions) IRS	
Date 09/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Viterbi, Alan Contributor address; City; State; Zip Code 4650 Rancho Del Mar Trl San Diego, CA 92130	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Liquid Environmental Solutions	
Date 11/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Von Ohlen, Michael Contributor address; City; State; Zip Code 2709 E 5th St Austin, TX 78702	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Prism	
Date 12/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waldman DeLozier, Abbe Contributor address; City; State; Zip Code 10708 Regal Oaks Dr Austin, TX 78737	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-employed	
Date 12/03/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ward, Bob Contributor address; City; State; Zip Code 1707 Romeria Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Appraiser		Employer (See Instructions) Self-employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 52/54 Report: 54/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/09/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weed, Betty 6 Contributor address; City; State; Zip Code 2218 Alta Vista Ave Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Research		10 Employer (See Instructions) TEA	
Date 07/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendler, Ed Contributor address; City; State; Zip Code 4803 Balcones Dr Austin, TX 78731	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-employed	
Date 10/25/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendler, Ed Contributor address; City; State; Zip Code 4803 Balcones Dr Austin, TX 78731	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-employed	
Date 09/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Werner, James Contributor address; City; State; Zip Code 3521 Starline Dr Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Managing Member/Partner		Employer (See Instructions) Silicon Hills Wealth Management	
Date 10/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whitley, Tracey Contributor address; City; State; Zip Code 908 Payne Ave Austin, TX 78757	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Deputy Branch Manager		Employer (See Instructions) Texas RioGrande Legal Aid	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 53/54 Report: 55/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 10/16/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whitworth, David 6 Contributor address; City; State; Zip Code 3907 Edgerock Dr Austin, TX 78731	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Urban Infill builder		10 Employer (See Instructions) David Whitworth Development Company	
Date 11/19/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wittliff, Sally Contributor address; City; State; Zip Code 1301 Kent Ln Austin, TX 78703-3816	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed	
Date 07/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yates, Ira Contributor address; City; State; Zip Code 5711 State Hwy #45 Austin, TX 78739	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yeatts, Malcolm Contributor address; City; State; Zip Code 4811 Allison Cv Austin, TX 78741	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) City of Austin	
Date 12/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) York, Carrie Contributor address; City; State; Zip Code 2300 Independence Dr Austin, TX 78745	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Broker, Realtor		Employer (See Instructions) Self-employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 54/54 Report: 56/93	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 12/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Young, Keith and Jeanna 6 Contributor address; City; State; Zip Code 7315 Scenic Brook Dr Austin, TX 78736	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Civil Engineer		10 Employer (See Instructions) Bury, Inc.	
Date 12/30/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zandan, Peter Contributor address; City; State; Zip Code 98 San Jacinto Blvd Austin, TX 78701	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed	
Date 12/09/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zuniga, Diana Contributor address; City; State; Zip Code 300 Bowie St #3302 Austin, TX 78703	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Investors Alliance, Inc	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/32 Report: 57/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 10/18/2013	5 Payee name ActBlue
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6 Amount (\$) \$40.00	7 Payee address City; State; Zip Code 366 Summer St Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/18/2013	Payee name ActBlue
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Amount (\$) \$60.00	Payee address City; State; Zip Code 366 Summer St Somerville, MA 02144
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Tip for contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/01/2013	Payee name ADP Financial Services
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Amount (\$) \$1,891.65	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/05/2013	Payee name ADP Financial Services
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Amount (\$) \$97.01	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Pauroll processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/32 Report: 58/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 07/25/2013	5 Payee name ADP Financial Services
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6 Amount (\$) \$1,859.62	7 Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll taxes
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/02/2013	Payee name ADP Financial Services
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Amount (\$) \$70.36	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/22/2013	Payee name ADP Financial Services
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Amount (\$) \$2,515.68	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll taxes
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/06/2013	Payee name ADP Financial Services
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Amount (\$) \$75.69	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/32 Report: 59/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 09/25/2013	5 Payee name ADP Financial Services
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6 Amount (\$) \$1,624.87	7 Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll taxes
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/04/2013	Payee name ADP Financial Services
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Amount (\$) \$70.36	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/24/2013	Payee name ADP Financial Services
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Amount (\$) \$2,299.68	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll taxes
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2013	Payee name ADP Financial Services
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Amount (\$) \$151.38	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/32 Report: 60/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 11/01/2013	5 Payee name ADP Financial Services
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6 Amount (\$) \$402.44	7 Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll taxes
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/19/2013	Payee name ADP Financial Services
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Amount (\$) \$2,721.74	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll taxes
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/29/2013	Payee name ADP Financial Services
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Amount (\$) \$75.69	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/10/2013	Payee name Aetna
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Amount (\$) \$641.80	Payee address City; State; Zip Code PO Box 14079 Lexington, KY 40512
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Employee health insurance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/32 Report: 61/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 11/20/2013	5 Payee name Aetna				
6 Amount (\$) \$2,814.30	7 Payee address City; State; Zip Code PO Box 14079 Lexington, KY 40512				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Employee health insurance		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 11/20/2013	Payee name Amazon.com				
Amount (\$) \$49.81	Payee address City; State; Zip Code 440 Terry Ave N Seattle, WA 98109				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies: printer supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 11/20/2013	Payee name Amazon.com				
Amount (\$) \$48.50	Payee address City; State; Zip Code 440 Terry Ave N Seattle, WA 98109				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies: water filter for office		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/26/2013	Payee name AT&T				
Amount (\$) \$195.88	Payee address City; State; Zip Code PO Box 537105 Atlanta, GA 30353				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office internet service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/32 Report: 62/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 10/15/2013	5 Payee name AT&T
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6 Amount (\$) \$84.97	7 Payee address City; State; Zip Code PO Box 537105 Atlanta, GA 30353
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office internet service
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/04/2013	Payee name AT&T
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Amount (\$) \$197.45	Payee address City; State; Zip Code PO Box 537105 Atlanta, GA 30353
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office internet service
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/20/2013	Payee name Austin AFL-CIO Council
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Amount (\$) \$310.00	Payee address City; State; Zip Code PO Box 301074 Austin, TN 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Labor day ad
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/07/2013	Payee name Austin AFL-CIO Council
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Amount (\$) \$21.65	Payee address City; State; Zip Code PO Box 301074 Austin, TN 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office utilities
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/32 Report: 63/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 11/07/2013		5 Payee name Austin Energy			
6 Amount (\$) \$511.15		7 Payee address City; State; Zip Code 721 Barton Springs Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office utilities	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/06/2013		Payee name Austin Energy			
Amount (\$) \$243.91		Payee address City; State; Zip Code 721 Barton Springs Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office utilities	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/22/2013		Payee name Austin NAACP			
Amount (\$) \$260.00		Payee address City; State; Zip Code 1710 E 12th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/22/2013		Payee name Austin NAACP			
Amount (\$) \$150.00		Payee address City; State; Zip Code 1710 E 12th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertisement in awards event program	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/32 Report: 64/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 07/16/2013		5 Payee name Austin Tejano Democrats			
6 Amount (\$) \$200.00		7 Payee address City; State; Zip Code 2544 Stoutwood Cir Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/22/2013		Payee name Best Brothers Carpet Cleaning			
Amount (\$) \$115.00		Payee address City; State; Zip Code 5907 Clementine Ln Austin, TX 78744			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office carpet cleaning	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/19/2013		Payee name Caballero, Kristian			
Amount (\$) \$1,757.94		Payee address City; State; Zip Code 1112 E 9th St Unit A Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/18/2013		Payee name Capital Area Democratic Women			
Amount (\$) \$250.00		Payee address City; State; Zip Code PO Box 12962 Austin, TX 78711			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/32 Report: 65/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 12/13/2013	5 Payee name Capital Area Democratic Women
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6 Amount (\$) \$25.00	7 Payee address City; State; Zip Code PO Box 12962 Austin, TX 78711
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/13/2013	Payee name Capital Area Democratic Women
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Amount (\$) \$13.00	Payee address City; State; Zip Code PO Box 12962 Austin, TX 78711
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/10/2013	Payee name Chimp Disco
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Amount (\$) \$50.00	Payee address City; State; Zip Code 3707 Manchaca Rd. Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign logo design services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/02/2013	Payee name Chimp Disco
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Amount (\$) \$230.00	Payee address City; State; Zip Code 3707 Manchaca Rd. Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign letterhead design
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 10/32 Report: 66/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 08/22/2013	5 Payee name Cricket Wireless
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6 Amount (\$) \$60.61	7 Payee address City; State; Zip Code 1030 Norwood Park Blvd Ste.406 Austin, TX 78753
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office cell phones
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/19/2013	Payee name Cricket Wireless
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Amount (\$) \$37.75	Payee address City; State; Zip Code 1030 Norwood Park Blvd Ste.406 Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office cell phones
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/21/2013	Payee name Cricket Wireless
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Amount (\$) \$33.56	Payee address City; State; Zip Code 1030 Norwood Park Blvd Ste.406 Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office cell phones
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/22/2013	Payee name Cricket Wireless
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Amount (\$) \$17.32	Payee address City; State; Zip Code 1030 Norwood Park Blvd Ste.406 Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office cell phones
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/32 Report: 67/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 11/22/2013		5 Payee name Cricket Wireless			
6 Amount (\$) \$11.91		7 Payee address City; State; Zip Code 1030 Norwood Park Blvd Ste.406 Austin, TX 78753			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office cell phones	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/22/2013		Payee name Cricket Wireless			
Amount (\$) \$36.56		Payee address City; State; Zip Code 1030 Norwood Park Blvd Ste.406 Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign cell phones	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/23/2013		Payee name Cricket Wireless			
Amount (\$) \$21.48		Payee address City; State; Zip Code 1030 Norwood Park Blvd Ste.406 Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office cell phones	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/22/2013		Payee name Curra's Grill			
Amount (\$) \$35.29		Payee address City; State; Zip Code 614 E Oltorf St Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting meal	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/32 Report: 68/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 07/01/2013	5 Payee name Democracy Engine, LLC
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6 Amount (\$) \$367.02	7 Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card contribution fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/05/2013	Payee name Democracy Engine, LLC
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Amount (\$) \$531.08	Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/02/2013	Payee name Democracy Engine, LLC
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Amount (\$) \$210.35	Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/08/2013	Payee name Democracy Engine, LLC
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Amount (\$) \$5.98	Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/32 Report: 69/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 09/03/2013	5 Payee name Democracy Engine, LLC
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6 Amount (\$) \$72.47	7 Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/02/2013	Payee name Democracy Engine, LLC
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Amount (\$) \$50.00	Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/04/2013	Payee name Democracy Engine, LLC
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Amount (\$) \$45.00	Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/02/2013	Payee name Democracy Engine, LLC
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Amount (\$) \$144.80	Payee address City; State; Zip Code 850 Quincy St Washington, DC 20011
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/32 Report: 70/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 07/23/2013	5 Payee name Emmons, Joe
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6 Amount (\$) \$2,500.00	7 Payee address City; State; Zip Code 3311 Red River St Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/22/2013	Payee name Emmons, Joe
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Amount (\$) \$2,047.19	Payee address City; State; Zip Code 3311 Red River St Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/26/2013	Payee name Emmons, Joe
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Amount (\$) \$250.00	Payee address City; State; Zip Code 3311 Red River St Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paycheck advance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/25/2013	Payee name Emmons, Joe
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Amount (\$) \$2,047.19	Payee address City; State; Zip Code 3311 Red River St Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 15/32 Report: 71/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 11/19/2013		5 Payee name Emmons, Joe			
6 Amount (\$) \$2,047.19		7 Payee address City; State; Zip Code 3311 Red River St Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/24/2013		Payee name Emmons, Joe			
Amount (\$) \$2,047.19		Payee address City; State; Zip Code 3311 Red River St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/16/2013		Payee name Exxon			
Amount (\$) \$20.00		Payee address City; State; Zip Code 3431 W William Cannon Dr Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff travel: fuel	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/03/2013		Payee name Exxon			
Amount (\$) \$75.98		Payee address City; State; Zip Code 6615 Airport Blvd Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Candidate travel: fuel	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 16/32 Report: 72/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 11/07/2013		5 Payee name Exxon			
6 Amount (\$) \$30.00		7 Payee address City; State; Zip Code 3431 W William Cannon Dr Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff travel: fuel	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/11/2013		Payee name Facebook Inc			
Amount (\$) \$1.48		Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/23/2013		Payee name Facebook Inc			
Amount (\$) \$20.00		Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/24/2013		Payee name Facebook Inc			
Amount (\$) \$25.00		Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 17/32 Report: 73/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 09/27/2013	5 Payee name Facebook Inc
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6 Amount (\$) \$54.97	7 Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/02/2013	Payee name Facebook Inc
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Amount (\$) \$20.03	Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/12/2013	Payee name Facebook Inc
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Amount (\$) \$26.54	Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/12/2013	Payee name Facebook Inc
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Amount (\$) \$30.00	Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 18/32 Report: 74/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 11/13/2013	5 Payee name Facebook Inc
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6 Amount (\$) \$40.00	7 Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/02/2013	Payee name Facebook Inc
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Amount (\$) \$68.06	Payee address City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/24/2013	Payee name FedEx Office
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Amount (\$) \$7.57	Payee address City; State; Zip Code 5555 N Lamar Blvd Austin, TX 78751
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Overnight shipping
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/24/2013	Payee name FedEx Office
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Amount (\$) \$7.57	Payee address City; State; Zip Code 5555 N Lamar Blvd Austin, TX 78751
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Overnight shipping
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 19/32 Report: 75/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 07/26/2013		5 Payee name FedEx Office			
6 Amount (\$) \$46.06		7 Payee address City; State; Zip Code 5555 N Lamar Blvd Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office opening event printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/25/2013		Payee name FedEx Office			
Amount (\$) \$34.03		Payee address City; State; Zip Code 5555 N Lamar Blvd Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign event sponsor board	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2013		Payee name FedEx Office			
Amount (\$) \$67.63		Payee address City; State; Zip Code 5555 N Lamar Blvd Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign event sponsor board	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/02/2013		Payee name Fine, Kristin			
Amount (\$) \$2,869.44		Payee address City; State; Zip Code 2901 Barton Skyway Apt. 2001 Austin, TX 78748			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 20/32 Report: 76/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 07/25/2013	5 Payee name Fine, Kristin
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6 Amount (\$) \$2,869.44	7 Payee address City; State; Zip Code 2901 Barton Skyway Apt. 2001 Austin, TX 78748
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/22/2013	Payee name Fine, Kristin
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Amount (\$) \$2,869.44	Payee address City; State; Zip Code 2901 Barton Skyway Apt. 2001 Austin, TX 78748
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/25/2013	Payee name Fine, Kristin
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Amount (\$) \$2,869.44	Payee address City; State; Zip Code 2901 Barton Skyway Apt. 2001 Austin, TX 78748
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/24/2013	Payee name Fine, Kristin
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Amount (\$) \$2,869.44	Payee address City; State; Zip Code 2901 Barton Skyway Apt. 2001 Austin, TX 78748
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 21/32 Report: 77/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 11/19/2013	5 Payee name Fine, Kristin
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6 Amount (\$) \$2,869.44	7 Payee address City; State; Zip Code 2901 Barton Skyway Apt. 2001 Austin, TX 78746
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/01/2013	Payee name Flynn, Ben
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Amount (\$) \$2,095.94	Payee address City; State; Zip Code 5200 North Lamar Blvd. Apt G101 Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/25/2013	Payee name Flynn, Ben
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Amount (\$) \$2,482.69	Payee address City; State; Zip Code 5200 North Lamar Blvd. Apt G101 Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/22/2013	Payee name Flynn, Ben
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Amount (\$) \$2,482.69	Payee address City; State; Zip Code 5200 North Lamar Blvd. Apt G101 Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 22/32 Report: 78/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 11/01/2013		5 Payee name Flynn, Ben			
6 Amount (\$) \$692.62		7 Payee address City; State; Zip Code 5200 North Lamar Blvd. Apt G101 Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/08/2013		Payee name Greenlights for Nonprofit Success			
Amount (\$) \$385.00		Payee address City; State; Zip Code 7703 N. Lamar Blvd. Ste. 400 Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff training fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/16/2013		Payee name Greenlights for Nonprofit Success			
Amount (\$) \$110.00		Payee address City; State; Zip Code 7703 N. Lamar Blvd. Ste. 400 Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff training fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/30/2013		Payee name Greenlights for Nonprofit Success			
Amount (\$) \$55.00		Payee address City; State; Zip Code 7703 N. Lamar Blvd. Ste. 400 Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff training fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 23/32 Report: 79/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 08/26/2013	5 Payee name Harrison Pearson and Associates
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6 Amount (\$) \$3,000.00	7 Payee address City; State; Zip Code 4014 Medical Pkwy #100 Austin, TX 78756
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office rent and deposit
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/15/2013	Payee name Harrison Pearson and Associates
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Amount (\$) \$4,000.00	Payee address City; State; Zip Code 4014 Medical Pkwy #100 Austin, TX 78756
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office rent
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/25/2013	Payee name Harrison Pearson and Associates
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Amount (\$) \$2,000.00	Payee address City; State; Zip Code 4014 Medical Pkwy #100 Austin, TX 78756
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office rent
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/24/2013	Payee name Hughes, William
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Amount (\$) \$2,095.94	Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 24/32 Report: 80/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 11/01/2013	5 Payee name Hughes, William
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6 Amount (\$) \$1,112.70	7 Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/19/2013	Payee name Hughes, William
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Amount (\$) \$2,095.94	Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/15/2013	Payee name Humana
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Amount (\$) \$400.00	Payee address City; State; Zip Code 500 W Main St Lexington, KY 40512
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff health insurance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/05/2013	Payee name Humana
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Amount (\$) \$400.00	Payee address City; State; Zip Code 500 W Main St Lexington, KY 40512
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Employee health insurance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 25/32 Report: 81/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 07/10/2013		5 Payee name Joyner Group Consulting, LLC			
6 Amount (\$) \$600.00		7 Payee address City; State; Zip Code 1524 S IH 35 Ste 200 Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign finance reporting service	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/03/2013		Payee name Mexitas Restaurant			
Amount (\$) \$100.00		Payee address City; State; Zip Code 1107 N IH 35 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Latinos for Brigid Event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/03/2013		Payee name Mexitas Restaurant			
Amount (\$) \$236.48		Payee address City; State; Zip Code 1107 N IH 35 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Latinos for Brigid event catering	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/01/2013		Payee name Moore, Charlotte			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 4424 Gaines Ranch Loop Apt 1013 Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 26/32 Report: 82/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 10/16/2013	5 Payee name Moore, Charlotte
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6 Amount (\$) \$1,750.00	7 Payee address City; State; Zip Code 4424 Gaines Ranch Loop Apt 1013 Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/04/2013	Payee name Moore, Charlotte
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Amount (\$) \$900.00	Payee address City; State; Zip Code 4424 Gaines Ranch Loop Apt 1013 Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/03/2013	Payee name Moore, Charlotte
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Amount (\$) \$900.00	Payee address City; State; Zip Code 4424 Gaines Ranch Loop Apt 1013 Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/30/2013	Payee name Mosaic Strategies Group
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Amount (\$) \$500.00	Payee address City; State; Zip Code 408 Bloomfield Ave Ste A Montclair, NJ 07042
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign website redesign
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 27/32 Report: 83/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 08/23/2013	5 Payee name Mosaic Strategies Group
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6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 408 Bloomfield Ave Ste A Montclair, NJ 07042
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign website design
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/29/2013	Payee name Mosaic Strategies Group
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Amount (\$) \$675.00	Payee address City; State; Zip Code 408 Bloomfield Ave Ste A Montclair, NJ 07042
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign website training
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/20/2013	Payee name Mosaic Strategies Group
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Amount (\$) \$28.81	Payee address City; State; Zip Code 408 Bloomfield Ave Ste A Montclair, NJ 07042
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website maintenance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/19/2013	Payee name NationBuilder
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Amount (\$) \$588.00	Payee address City; State; Zip Code 448 S Hill St Ste 200 Los Angeles, CA 90013
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign database service
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 28/32 Report: 84/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 09/03/2013		5 Payee name Net Ingenuity			
6 Amount (\$) \$431.73		7 Payee address City; State; Zip Code 1741 Spyglass Dr #229 Austin, TX 78746			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign website design	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/16/2013		Payee name Non-Profid R&D			
Amount (\$) \$1,150.00		Payee address City; State; Zip Code PO Box 4167 Austin, TX 78630			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign website development	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/17/2013		Payee name Rindy Miller Associates			
Amount (\$) \$1,845.25		Payee address City; State; Zip Code 2401 E 6th #1007 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign walk cards and banner design	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/03/2013		Payee name Rodriguez, Genoveva			
Amount (\$) \$2,000.00		Payee address City; State; Zip Code 714 Turtle Creek Blvd #120 Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event consulting services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 29/32 Report: 85/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 11/25/2013	5 Payee name Shea, Brigid
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6 Amount (\$) \$49.87	7 Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Schedule G Reimbursement
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/25/2013	Payee name Shea, Brigid
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Amount (\$) \$48.90	Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Schedule G Reimbursement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/25/2013	Payee name Shea, Brigid
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Amount (\$) \$49.76	Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Schedule G Reimbursement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/25/2013	Payee name Shea, Brigid
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Amount (\$) \$48.98	Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Schedule G Reimbursement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 30/32 Report: 86/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 07/16/2013	5 Payee name Shell				
6 Amount (\$) \$20.00	7 Payee address City; State; Zip Code 7110 E Ben White Blvd Austin, TX 78741				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Candidate travel: fuel		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/28/2013	Payee name Shell				
Amount (\$) \$42.75	Payee address City; State; Zip Code 2701 Exposition Blvd Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff travel: fuel		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 09/26/2013	Payee name Texas Democratic Party				
Amount (\$) \$350.00	Payee address City; State; Zip Code 4818 E Ben White Ste 104 Austin, TX 78741				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Voter file access		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 07/23/2013	Payee name Texas Made Productions, LLC				
Amount (\$) \$450.00	Payee address City; State; Zip Code 3707 Manchaca #177 Austin, TX 78704				
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign photography and video		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 31/32 Report: 87/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 09/18/2013	5 Payee name Texas Made Productions, LLC				
6 Amount (\$) \$429.00	7 Payee address City; State; Zip Code 3707 Manchaca #177 Austin, TX 78704				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign video production		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 08/16/2013	Payee name Travis County Democratic Party				
Amount (\$) \$250.00	Payee address City; State; Zip Code 1311 E 6th St Ste B Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political contribution		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 07/15/2013	Payee name Travis County Tax Assessor Collector				
Amount (\$) \$10.00	Payee address City; State; Zip Code 5501 Airport Blvd Austin, TX 78751				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Notary service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 07/26/2013	Payee name United States Postal Service				
Amount (\$) \$110.40	Payee address City; State; Zip Code 3507 N Lamar Blvd Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign event postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 32/32 Report: 88/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 09/09/2013	5 Payee name Worley Printing
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6 Amount (\$) \$1,299.02	7 Payee address City; State; Zip Code 3217 N. I.H. 35 Austin, TX 78722
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign yard signs
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/18/2013	Payee name Worley Printing
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Amount (\$) \$492.40	Payee address City; State; Zip Code 3217 N. I.H. 35 Austin, TX 78722
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign thank you notes, envelopes and postage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/11/2013	Payee name Worley Printing
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Amount (\$) \$2,068.66	Payee address City; State; Zip Code 3217 N. I.H. 35 Austin, TX 78722
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign yard signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/5 Report: 89/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 09/02/2013		5 Payee name Austin Java			
6 Amount (\$) \$12.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 1206 Parkway Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	
Date 10/14/2013		Payee name Buenos Aires Cafe			
Amount (\$) \$19.77 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1201 E 6th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	
Date 11/05/2013		Payee name Cisco's Bakery			
Amount (\$) \$14.68 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1511 E 6th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	
Date 10/30/2013		Payee name Einstein's Bagels			
Amount (\$) \$4.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 3010 W Anderson Ln #2A Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/5 Report: 90/93		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00008056	
4 Date 08/13/2013		5 Payee name El Gallo			
6 Amount (\$) \$5.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 8701 N Lamar Blvd Austin, TX 78753			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	
Date 08/14/2013		Payee name El Gallo			
Amount (\$) \$5.61 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 8701 N Lamar Blvd Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	
Date 10/09/2013		Payee name El Gallo			
Amount (\$) \$9.11 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 8701 N Lamar Blvd Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	
Date 11/01/2013		Payee name El Mercado			
Amount (\$) \$7.31 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1302 S 1st St Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/5 Report: 91/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 11/09/2013	5 Payee name Hil-Berts
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6 Amount (\$) \$15.77 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 7211 Burnet Rd Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign intern lunch
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Date 11/23/2013	Payee name Hil-Berts
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Amount (\$) \$9.52 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 7211 Burnet Rd Austin, TX 78757
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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Date 10/18/2013	Payee name Kim Phung Restaurant
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Amount (\$) \$18.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 7601 N Lamar Blvd Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staff food/beverage
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Date 11/21/2013	Payee name Kim Phung Restaurant
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Amount (\$) \$17.54 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 7601 N Lamar Blvd Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staff food/beverage
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/5 Report: 92/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 10/16/2013	5 Payee name New World Deli
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6 Amount (\$) \$5.87 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 4101 Guadalupe St Austin, TX 78751
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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Date 10/16/2013	Payee name New World Deli
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Amount (\$) \$4.52 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 4101 Guadalupe St Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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Date 11/20/2013	Payee name New World Deli
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Amount (\$) \$6.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 4101 Guadalupe St Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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Date 08/19/2013	Payee name Sherlock's Baker Street Pub
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Amount (\$) \$6.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 9012 Research Blvd Austin, TX 78758
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/5 Report: 93/93	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 11/18/2013	5 Payee name Sherlock's Baker Street Pub
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6 Amount (\$) \$6.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 9012 Research Blvd Austin, TX 78758
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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Date 08/15/2013	Payee name Vino Vino
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Amount (\$) \$90.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 4119 Guadalupe St Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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Date 08/22/2013	Payee name ZTejas
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Amount (\$) \$14.45 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 9400 Arboretum Blvd Austin, TX 78759
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign meeting food/beverage
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