



# 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

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

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 15,840.96

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 23,290.34

CONTRIBUTION BALANCE

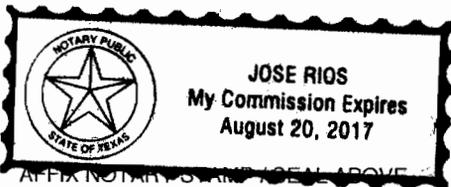
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 68,738.17

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

Sworn to and subscribed before me, by the said Brigid Shea, this the 3rd day of February 20 14, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Jose Rios  
Print name of officer administering oath

Notary Public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/15 Report: 3/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abrams, Adam  6 Contributor address; City; State; Zip Code 1210 Grove Blvd #201 Austin, TX 78741	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Save Our Springs	
4 Date  01/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alsup, Marion  6 Contributor address; City; State; Zip Code 2311 Pruett St Austin, TX 78703	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Docent Director		Employer (See Instructions) Zilker Botanical Garden	
4 Date  01/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayres, Robert  6 Contributor address; City; State; Zip Code 2408 Keating Lane Austin, TX 78703	7 Amount of contribution (\$)  \$1,000.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Land Steward		Employer (See Instructions) Shield Ranch	
4 Date  01/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barkley, Medora  6 Contributor address; City; State; Zip Code 3117 Guadalupe St Austin, TX 78705	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate Investments/Property Manager		Employer (See Instructions) Self	
4 Date  01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, Jay  6 Contributor address; City; State; Zip Code 1108 W 7th Street Austin, TX 78703	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Barnes Gromatzky Kosarek Architects	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/15 Report: 4/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beck, Ken  6 Contributor address; City; State; Zip Code 15911 Booth Circle Leander, TX 78641	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) civic volunteer		10 Employer (See Instructions) self	
Date  01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bornstein, Sue  Contributor address; City; State; Zip Code 3111 Beverly Drive Dallas, TX 75205	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brim, Jay  Contributor address; City; State; Zip Code 1309 Lost Creek Blvd Austin, TX 78746	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Brim, Arnett, Robinett & Connors, P.C.	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Bick  Contributor address; City; State; Zip Code 4208 Shoalwood Drive Austin, TX 78756	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Hyde Park Bar and Grill	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryarly, Richard  Contributor address; City; State; Zip Code 5800 Harrington Cv Austin, TX 78731	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Austin Diagnostic Clinic		Employer (See Instructions) Physician	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/15 Report: 5/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butts, David  6 Contributor address; City; State; Zip Code 1914 Patton Ln Austin, TX 78723	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Political Consultant		10 Employer (See Instructions) Self	
4 Date 01/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Claunch, Dave  6 Contributor address; City; State; Zip Code 305 McConnell Drive West Lake, TX 78746	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Liaison Resources	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, George  6 Contributor address; City; State; Zip Code 3306 Gentry Drive West Lake, TX 78746	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) sweeper		Employer (See Instructions) Hill Country Conservancy	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, Rick  6 Contributor address; City; State; Zip Code 507 Pressler St APT #4132 Austin, TX 78703	7 Amount of contribution (\$)  \$165.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Travis County	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel, Harold  6 Contributor address; City; State; Zip Code 3203 Cupid Drive Austin, TX 78735	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Client Support Engineer		Employer (See Instructions) AcademicWorks	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/15 Report: 6/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawlett, Haythem ..... 6 Contributor address; City; State; Zip Code 16100 Chateau Ave Austin, TX 78734	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Real Estate Developer		10 Employer (See Instructions) Rough Hollow Development, LTD	
Date 01/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dobbs, Andrew (Mr.) ..... Contributor address; City; State; Zip Code 618 Downing Drive Richardson, TX 75080	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) Texas Campaign for the Environment	
Date 01/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellison, Chris ..... Contributor address; City; State; Zip Code 2500 Flora Cove 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) UT San Antonio	
Date 01/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferguson, Frances ..... Contributor address; City; State; Zip Code 1013 Harwood Pl Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Affordable Housing		Employer (See Instructions) Neighborworks America	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedman, Adam ..... Contributor address; City; State; Zip Code 4330 Bull Crk APT #4108 Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lloyd Gosselink	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/15 Report: 7/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedman, Jeff  6 Contributor address; City; State; Zip Code 3500 Jefferson Street Suite 110 Austin, TX 78731	7 Amount of contribution (\$)  \$180.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Capra & Cavelli	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedman, Jeff  Contributor address; City; State; Zip Code 3500 Jefferson Street Suite 110 Austin, TX 78731	Amount of contribution (\$)  \$120.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Capra & Cavelli	
Date  01/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Galloway, Jessica  Contributor address; City; State; Zip Code 908 E 53rd Street Austin, TX 78751	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Alatian Energy	
Date  01/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilmore, Henry  Contributor address; City; State; Zip Code 803 North Main Street PO Box 988 Burnet, TX 78611	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) DuBois, Bryant and Campbell, LLP	
Date  01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gurasich, Bill  Contributor address; City; State; Zip Code 3813 Travis County Circle 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	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/15 Report: 8/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harriman, Suzanne  6 Contributor address; City; State; Zip Code 2304 Euclid Ave Austin, TX 78704	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions) N/A	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hines, Vick  Contributor address; City; State; Zip Code 3104 Mohawk Rd #A Austin, TX 78757	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 01/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hough, Catherine  Contributor address; City; State; Zip Code 2502 Twin Oaks Drive Austin, TX 78757	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Asst Professor		Employer (See Instructions) UT	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hulting, Jane  Contributor address; City; State; Zip Code 8130 Cedar Road Elkins Park, PA 19027	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) teacher, musician		Employer (See Instructions) self	
Date 01/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jochnowitz, Daniel  Contributor address; City; State; Zip Code 2715 Padina Drive Austin, TX 78733	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Philips & Reiter	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/15 Report: 9/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kralj, Nicholas (Mr.) ..... 6 Contributor address; City; State; Zip Code 3809 Gaines Court Austin, TX 78735	7 Amount of contribution (\$)  \$165.96	8 In-kind contribution description (if applicable) Food and beverage for campaign event 1/18/14
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Kralj Consulting Inc	
Date  01/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lauterstein, David ..... Contributor address; City; State; Zip Code 1405 W 39th 1/2 St Austin, TX 78756	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Co-Director		Employer (See Instructions) Lauterstein-Conway Massage School	
Date  01/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lavine, Dick ..... Contributor address; City; State; Zip Code 803 Avondale Rd Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Fiscal Analyst		Employer (See Instructions) Center for Public Policy Priorities	
Date  01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Dawn and Fred ..... Contributor address; City; State; Zip Code 4509 Edgemont Dr Austin, TX 78731	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self	
Date  01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linares-Moeller, Nora ..... Contributor address; City; State; Zip Code PO Box 2412 Wimberley, TX 78676	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) development consultant		Employer (See Instructions) self	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/15 Report: 10/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Longoria, eduardo  6 Contributor address; City; State; Zip Code 1508 Norris Dr Austin, TX 78704	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) na		10 Employer (See Instructions) na	
4 Date  01/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowerre, Richard  6 Contributor address; City; State; Zip Code 725 Patterson Austin, TX 78703	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self	
4 Date  01/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Eduardo  6 Contributor address; City; State; Zip Code 7601 Seneca Falls Loop Austin, TX 78739	7 Amount of contribution (\$)  \$20.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Self	
4 Date  01/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIver, Diana  6 Contributor address; City; State; Zip Code 4101 Parkstone Heights Drive Austin, TX 78746	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate Development		Employer (See Instructions) DMA Companies	
4 Date  01/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meador, Marlene  6 Contributor address; City; State; Zip Code 6905 Shoal Creek Austin, TX 78757	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) ACC	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/15 Report: 11/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mikhail, Sam  6 Contributor address; City; State; Zip Code 305 Lowell Ln Austin, TX 78733	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) President		10 Employer (See Instructions) Mikhail Investments	
Date  01/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Brenda  Contributor address; City; State; Zip Code 1002 Lorrain Street Austin, TX 78703	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) self	
Date  01/21/2014	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 (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) King Engineering	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newberger, David  Contributor address; City; State; Zip Code 2905 San Gabriel St #218 Austin, TX 78705	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) na		Employer (See Instructions) na	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nix, Dave  Contributor address; City; State; Zip Code 8700 Tallwood Drive Austin, TX 78759	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) David G Nix PC	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/15 Report: 12/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ogren, Jonathan  6 Contributor address; City; State; Zip Code 2315 Willow St Austin, TX 78702	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Environmental Planner		10 Employer (See Instructions) Siglo Group	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Palmer, Janet  Contributor address; City; State; Zip Code 5505 Hero Dr Austin, TX 78735	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Christian Science Church	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peel, Larry  Contributor address; City; State; Zip Code PO Box 248 Austin, TX 78767	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Builder/Development		Employer (See Instructions) self	
Date  01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pruett, Dan  Contributor address; City; State; Zip Code 6306 Clairmont Drive Austin, TX 78749	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Meals on Wheels and More	
Date  01/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Cyrus  Contributor address; City; State; Zip Code 4205 Avenue F Austin, TX 78751	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Conservation Director		Employer (See Instructions) Sierra Club	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/15 Report: 13/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 01/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richey, Howie ..... 6 Contributor address; City; State; Zip Code 6501 Linda Lane Austin, TX 78723	7 Amount of contribution (\$) \$25.00	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) Proofreader		10 Employer (See Instructions) State of Texas	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rieck, Peter ..... Contributor address; City; State; Zip Code PO Box 202768 Austin, TX 78720	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) Manager		Employer (See Instructions) Seton Healthcare Family	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Brian ..... Contributor address; City; State; Zip Code 1112 W 9th Street Austin, TX 78703	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) Real Estate		Employer (See Instructions) Self	
Date 01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Santiago, Gwendolyn ..... Contributor address; City; State; Zip Code 5915 Northwest Pl Austin, TX 78731	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) Retired		Employer (See Instructions) Retired	
Date 01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Selby, Henry ..... Contributor address; City; State; Zip Code 2000 Sharon Ln Austin, TX 78703	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) Media Production Professional		Employer (See Instructions) Self	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/15 Report: 14/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date 01/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sherman, Lynn ..... 6 Contributor address; City; State; Zip Code PO Box 5605 Austin, TX 78763	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) finance		10 Employer (See Instructions) self	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skerpan-Wheeler, Elizabeth ..... Contributor address; City; State; Zip Code 8707 Donna Gail Drive Austin, TX 78757	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas State University	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Daniel ..... Contributor address; City; State; Zip Code 6807 Hardy Drive #4 Austin, TX 78757	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Writer/Editor		Employer (See Instructions) Self	
Date 01/22/2014	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 (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Fox, Smolen	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speir, Stephen ..... Contributor address; City; State; Zip Code 1225 Corona Drive Austin, TX 78723	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NEABACA, BAT, PAC	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/15 Report: 15/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stanley, Alfred  6 Contributor address; City; State; Zip Code 1409 Hardouin Ave Austin, TX 78703	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) Alfred Stanley & Associates	
Date  01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stollings, Luke  Contributor address; City; State; Zip Code 1104 Romeria Drive Austin, TX 78757	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Training Specialist and Elearning Development		Employer (See Instructions) TCEQ	
Date  01/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Strecker, Barbara  Contributor address; City; State; Zip Code 6611 Jamaica Ct Austin, TX 78757	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Adjunct Professor		Employer (See Instructions) ACC	
Date  01/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Summers, Robert  Contributor address; City; State; Zip Code 2401 Woodmont Ave Austin, TX 78703	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hohmann, Taube & Summers, LLP	
Date  01/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Summers, Robert  Contributor address; City; State; Zip Code 2401 Woodmont Ave Austin, TX 78703	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hohmann, Taube & Summers, LLP	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/15 Report: 16/27	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00008056	
4 Date  01/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taylor, Jack  6 Contributor address; City; State; Zip Code 5005 Avenue F Side A Austin, TX 78751	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) Instructor		10 Employer (See Instructions) Austin Community College	
Date  01/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vitanza, David  Contributor address; City; State; Zip Code 308 Camino Arbolago Lakeway, TX 78734	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) Real Estate		Employer (See Instructions) Lamar Sixth Austin	
Date  01/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Heyden  Contributor address; City; State; Zip Code 6006 Cary Drive Austin, TX 78757	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) Planner		Employer (See Instructions) Black + Vernooy Architecture and Urban Design	
Date  01/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warneke, Bob  Contributor address; City; State; Zip Code 310 Le Grande Ave Austin, TX 78704	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) Lawyer		Employer (See Instructions) Self	
Date  01/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warren, Tommy  Contributor address; City; State; Zip Code PO Box 9269 The Woodlands, TX 77387	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) T Warren Investments	



**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.

<b>1</b> PAGE # Schedule: 1/10 Report: 18/27	<b>2</b> FILER NAME Shea, Brigid (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00008056
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<b>4</b> Date 01/09/2014	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$28.00	<b>7</b> Payee address City; State; Zip Code 366 Summer St Somerville, MA 02144
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<b>8</b> 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"/> Capital Area Democratic Women Annual Membership Dues
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/10/2014	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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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll Fees
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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 01/13/2014	Payee name ADP Financial Services
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Amount (\$) \$185.98	Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll Tax
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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 01/21/2014	Payee name ADP Financial Services
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Amount (\$) \$42.64	Payee address City, State, Zip Code 8601 RR 2222 Austin, TX 78730
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll Fees
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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.

<b>1</b> PAGE # Schedule: 2/10 Report: 19/27	<b>2</b> FILER NAME Shea, Brigid (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00008056
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<b>4</b> Date 01/21/2014	<b>5</b> Payee name ADP Financial Services
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<b>6</b> Amount (\$) \$40.69	<b>7</b> Payee address City; State; Zip Code 8601 RR 2222 Austin, TX 78730
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll Fees
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Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/02/2014	Payee name Aetna
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Amount (\$) \$1,936.00	Payee address City; State; Zip Code PO Box 14079 Lexington, KY 40512
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<b>8</b> 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 <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/13/2014	Payee name Amazon.com Inc
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Amount (\$) \$43.72	Payee address City; State; Zip Code 1200 12th Ave South Ste 1200 Seattle, WA 98144-2734
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies: Printer Ink
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Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/23/2014	Payee name Amazon.com Inc
--------------------	------------------------------

Amount (\$) \$43.72	Payee address City; State; Zip Code 1200 12th Ave South Ste 1200 Seattle, WA 98144-2734
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies: Printer Ink
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Complete <b>ONLY</b> 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.

<b>1</b> PAGE # Schedule: 3/10 Report: 20/27	<b>2</b> FILER NAME Shea, Brigid (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00008056
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<b>4</b> Date 01/06/2014	<b>5</b> Payee name Austin Energy
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<b>6</b> Amount (\$) \$434.62	<b>7</b> Payee address City; State; Zip Code 721 Barton Springs Austin, TX 78783-2267
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<b>8</b> 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
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/13/2014	Payee name BestBuy.com
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Amount (\$) \$86.59	Payee address City; State; Zip Code 7601 Penn Ave S Richfield, MN 55423
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies: Printer
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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 01/04/2014	Payee name Caballero, Kristian (Ms.)
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Amount (\$) \$14.69	Payee address City; State; Zip Code 1112 E 9th St Unit A Austin, TX 78702
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff Travel
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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 01/22/2014	Payee name Caballero, Kristian (Ms.)
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Amount (\$) \$30.00	Payee address City; State; Zip Code 1112 E 9th St Unit A Austin, TX 78702
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff Travel
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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: 4/10 Report: 21/27	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00008056
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4 Date 01/20/2014	5 Payee name Capital of Texas Media Foundation Austin Monitor
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6 Amount (\$) \$216.50	7 Payee address City; State; Zip Code PO Box 867 Austin, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> News Subscription
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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 01/06/2014	Payee name Coffee Bean and Tea Leaf
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Amount (\$) \$11.47	Payee address City; State; Zip Code 3718 N Lamar Austin, TX 78705
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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"/> Beverages at meeting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/21/2014	Payee name Cricket Wireless
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Amount (\$) \$68.19	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 01/01/2014	Payee name Democracy Engine LLC
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Amount (\$) \$208.01	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 fees
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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.

<b>1 PAGE #</b> Schedule: 5/10 Report: 22/27		<b>2 FILER NAME</b> Shea, Brigid (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00008056	
<b>4 Date</b> 01/08/2014	<b>5 Payee name</b> Democracy Engine LLC				
<b>6 Amount (\$)</b> \$71.30	<b>7 Payee address</b> City; State; Zip Code 850 Quincy St Washington, DC 20011				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 01/15/2014	<b>Payee name</b> Democracy Engine LLC				
<b>Amount (\$)</b> \$26.11	<b>Payee address</b> City; State; Zip Code 850 Quincy St Washington, DC 20011				
<b>PURPOSE OF EXPENDITURE</b>	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 fees		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 01/22/2014	<b>Payee name</b> Democracy Engine LLC				
<b>Amount (\$)</b> \$49.39	<b>Payee address</b> City; State; Zip Code 850 Quincy St Washington, DC 20011				
<b>PURPOSE OF EXPENDITURE</b>	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 Fees		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 01/06/2014	<b>Payee name</b> Democracy Engine LLC				
<b>Amount (\$)</b> \$45.00	<b>Payee address</b> City; State; Zip Code 850 Quincy St Washington, DC 20011				
<b>PURPOSE OF EXPENDITURE</b>	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 fees		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1</b> PAGE # Schedule: 6/10 Report: 23/27	<b>2</b> FILER NAME Shea, Brigid (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00008056
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<b>4</b> Date 01/21/2014	<b>5</b> Payee name Emmons, Joe (Mr.)
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<b>6</b> Amount (\$) \$336.74	<b>7</b> Payee address City; State; Zip Code 3311 Red River St Austin, TX 78705
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff Travel
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/06/2014	Payee name Facebook Inc
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Amount (\$) \$40.00	Payee address City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	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 01/14/2014	Payee name Facebook Inc
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Amount (\$) \$25.87	Payee address City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	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 01/17/2014	Payee name Facebook Inc
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Amount (\$) \$27.47	Payee address City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	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.

<b>1</b> PAGE # Schedule: 7/10 Report: 24/27	<b>2</b> FILER NAME Shea, Brigid (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00008056
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<b>4</b> Date 01/22/2014	<b>5</b> Payee name Facebook Inc
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<b>6</b> Amount (\$) \$22.60	<b>7</b> Payee address City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025
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<b>8</b> 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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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/15/2014	Payee name Fine, Kristin (Ms.)
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Amount (\$) \$200.00	Payee address City; State; Zip Code 2901 Barton Skyway Apt 2001 Austin, TX 78748
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff Travel
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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 01/22/2014	Payee name Hughes, William (Mr.)
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Amount (\$) \$25.07	Payee address City; State; Zip Code 1009 Hillside Oaks Dr Austin, TX 78745
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Staff Travel
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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 01/02/2014	Payee name InFocus Campaigns
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Amount (\$) \$1,312.07	Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phone Calls
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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.

<b>1</b> PAGE # Schedule: 8/10 Report: 25/27	<b>2</b> FILER NAME Shea, Brigid (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00008056
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<b>4</b> Date 01/14/2014	<b>5</b> Payee name InFocus Campaigns
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<b>6</b> Amount (\$) \$901.14	<b>7</b> Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114
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<b>8</b> 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"/> Phone Calls
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/14/2014	Payee name Opinion Analysts Inc
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Amount (\$) \$9,500.00	Payee address City; State; Zip Code 906 Rio Grande St Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Polling Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Survey
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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 01/07/2014	Payee name Rubber Stamps Unlimited Inc
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Amount (\$) \$36.15	Payee address City; State; Zip Code 334 S Harvey Plymouth, MI 48170
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies: Pre-Inked Stamp
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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 01/17/2014	Payee name Southwest Stamp and Award
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Amount (\$) \$20.57	Payee address City; State; Zip Code 1308 W Anderson Ln Austin, TX 78757
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies: Pre-inked Stamp
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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.

<b>1 PAGE #</b> Schedule: 9/10 Report: 26/27		<b>2 FILER NAME</b> Shea, Brigid (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00008056	
<b>4 Date</b> 01/03/2014	<b>5 Payee name</b> Texas Made Productions				
<b>6 Amount (\$)</b> \$2,105.00	<b>7 Payee address City; State; Zip Code</b> 3707 Manchaca #177 Austin, TX 78704				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Videography services		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/20/2014	<b>Payee name</b> Texas Made Productions				
<b>Amount (\$)</b> \$225.00	<b>Payee address City; State; Zip Code</b> 3707 Manchaca #177 Austin, TX 78704				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Photography		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/09/2014	<b>Payee name</b> Travis County Democratic Party				
<b>Amount (\$)</b> \$500.00	<b>Payee address City; State; Zip Code</b> 1311 E 6th St Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Sponsorship for event		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 01/07/2014	<b>Payee name</b> USPS				
<b>Amount (\$)</b> \$598.00	<b>Payee address City; State; Zip Code</b> 7700 Northcross Dr Austin, TX 78757				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Solicitation/Fundraising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Postage Stamps		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1</b> PAGE # Schedule: 10/10 Report: 27/27	<b>2</b> FILER NAME Shea, Brigid (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00008056
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<b>4</b> Date 01/07/2014	<b>5</b> Payee name USPS
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<b>6</b> Amount (\$) \$46.00	<b>7</b> Payee address City; State; Zip Code 7700 Northcross Dr Austin, TX 78757
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage Stamps
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<b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 01/13/2014	<b>Payee name</b> Van Osdol, Scott (Mr.)
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<b>Amount (\$)</b> \$420.63	<b>Payee address</b> City; State; Zip Code 7908 Swindon Lane Austin, TX 78745
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography
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Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 01/18/2014	<b>Payee name</b> Worley Printing
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<b>Amount (\$)</b> \$3,289.72	<b>Payee address</b> City; State; Zip Code 3217 North Interstate 35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard Sign Printing
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Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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