

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID 8591	2 Total pages filed: 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST John	MI
	NICKNAME	LAST Sisson	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 18617 Moreto Loop Pflugerville, TX 78660		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed 17		
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Thomas</i>	MI
	NICKNAME	LAST <i>Espanza</i>	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); <i>1811 S. First ST</i>		APT / SUITE #; CITY; STATE; ZIP CODE <i>Austin TX 78704</i>
	AREA CODE	PHONE NUMBER	EXTENSION
7 CAMPAIGN TREASURER PHONE	<i>512 - 441-0062</i>		
	8 REPORT TYPE		
<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month	Day	Year
	01/01/2015	THROUGH	06/30/2015
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
03/01/2016		<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
			Travis County Sheriff

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

13 C / OH NAME Sisson, John **14 Filer ID**

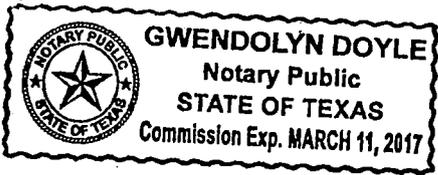
15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

<input type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		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)	\$	4,005.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	3,867.67
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	34,813.77
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	35,000.00

17 AFFADAVIT



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.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John Sisson, this the 13th day of July, 2015, to certify which, witness my hand and seal of office.

[Handwritten Signature] Gwendolyn Doyle Notary
Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Sisson, John	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,005.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 35,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,867.67
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/13
2 FILER NAME Sisson, John		3 Filer ID
4 Date 06/13/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Kris 6 Contributor address; City; State; Zip Code 8204 Red Willow Dr Austin, TX 78736	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Insurance Adjustment		9 Employer (See Instructions) Self-employed
Date 06/09/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Elizabeth Contributor address; City; State; Zip Code 3949 S Lamar Blvd Austin, TX 78704	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza Jr., Thomas Contributor address; City; State; Zip Code 1811 S. 1st St Austinn, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed
Date 06/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Russell Contributor address; City; State; Zip Code 10129 Channel Island Dr. Austin, TX 78747	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas State University
Date 06/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holman, Stephen Contributor address; City; State; Zip Code 4174 Bee Creek Rd Spicewood, TX 78669	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) General Partner		Employer (See Instructions) IH Habitations

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/13
2 FILER NAME Sisson, John		3 Filer ID
4 Date 06/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Craig 6 Contributor address; City; State; Zip Code 705 Clear Spring Cove Round Rock, TX 78665	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackoskie, George Contributor address; City; State; Zip Code 321 Woodward Street Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lobb, George Contributor address; City; State; Zip Code 1108 Lavaca St #110 Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Chad Contributor address; City; State; Zip Code 802 Creekbend Dr Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Emergency Vehicle Technician		Employer (See Instructions) City of Austin
Date 06/12/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madison, Willie Joe Contributor address; City; State; Zip Code PO Box 14867 Austin, TX 78761	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/13
2 FILER NAME Sisson, John		3 Filer ID
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria , Putter 6 Contributor address; City; State; Zip Code 51 Hedgebrook Way The Hills, TX 78738	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 06/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Virginia Contributor address; City; State; Zip Code 1048 Sunflower Trail Sunset Valley, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Disabled veteran		Employer (See Instructions) N/A
Date 06/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyert, Michael Contributor address; City; State; Zip Code 8413 Hanbridge Ln Austin, TX 78736	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paniagua, Richard Contributor address; City; State; Zip Code 109 Highview Rd Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kent Contributor address; City; State; Zip Code 1717 Timberwood Dr Austin, TX 78741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Pharmacy Technician		Employer (See Instructions) Walgreens

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/13
2 FILER NAME Sisson, John		3 Filer ID
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Roger 6 Contributor address; City; State; Zip Code PO Box 152412 Austin, TX 78715	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Security Contractor		9 Employer (See Instructions) Self-employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, David Contributor address; City; State; Zip Code 1253 Twin Cove Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Bradley Contributor address; City; State; Zip Code 2330 Maputo Place Dulles, VA 20189	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self-employed
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Jackie Contributor address; City; State; Zip Code 2713 Santa Rosa St Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law office of Thomas Esparza
Date 06/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Janet Contributor address; City; State; Zip Code 20203 National Dr. Lago Vista, TX 78645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Asst.		Employer (See Instructions) University of Texas

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 8/13
2 FILER NAME Sisson, John		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 06/17/2015	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisson, John	9 Loan Amount (\$) \$35,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 13100 Armaga Springs Rd Austin, TX 78727	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Sargent		13 Employer (See Instructions) Travis County Constable, Pct. 1
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 9/13	2 FILER NAME Sisson, John	3 Filer ID
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4 Date 05/12/2015	5 Payee name Bruce Elfant for Tax Assessor
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P. O. Box 49051 Austin, TX 78765
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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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/08/2015	Payee name Capital Area Democratic Women
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Amount (\$) \$25.00	Payee address; City; State; Zip Code TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership to CADW
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/20/2015	Payee name Capital Area Progressive Democrats
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Amount (\$) \$50.00	Payee address; City; State; Zip Code PO Box 413 Austin, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Awards event ticket
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 10/13		2 FILER NAME Sisson, John		3 Filer ID	
4 Date 05/29/2015		5 Payee name Capital One			
6 Amount (\$) \$15.00		7 Payee address; City; State; Zip Code 221 E Parmer Ln Austin, TX 78753			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Account fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/19/2015		Payee name CompuSigns			
Amount (\$) \$81.82		Payee address; City; State; Zip Code 632 N. Lamar Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Car magnets	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/23/2015		Payee name GoDaddy.com			
Amount (\$) \$25.34		Payee address; City; State; Zip Code http://www.godaddy.com TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website domain purchase	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 11/13	2 FILER NAME Sisson, John	3 Filer ID
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4 Date 03/26/2015	5 Payee name Harland Clarke
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6 Amount (\$) \$10.89	7 Payee address; City; State; Zip Code 5003 Stout Dr San Antonio, TX 78219
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check purchase
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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 06/02/2015	Payee name NationBuilder
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Amount (\$) \$19.00	Payee address; City; State; Zip Code 520 S Grand Ave Los Angeles, TX 90071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website hosting
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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 05/28/2015	Payee name Opp, Kevin
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Amount (\$) \$175.00	Payee address; City; State; Zip Code 2901 Barton Skyway #1603 Austin, TX 78746
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 12/13		2 FILER NAME Sisson, John		3 Filer ID	
4 Date 06/09/2015		5 Payee name Opp, Kevin			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 2901 Barton Skyway 1603 Austin, TX 78746			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/15/2015		Payee name Opp, Kevin			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 2901 Barton Skyway #1603 Austin, TX 78746			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/21/2015		Payee name Sarah Eckhardt Campaign			
Amount (\$) \$50.00		Payee address; City; State; Zip Code PO Box 301586 Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to candidate	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 13/13		2 FILER NAME Sisson, John		3 Filer ID	
4 Date 04/07/2015		5 Payee name Texas Democratic Party			
6 Amount (\$) \$2,000.00		7 Payee address; City; State; Zip Code 4818 E. Ben White Blvd Austin, TX 78741			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN access	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/23/2015		Payee name Travis County Democratic Party			
Amount (\$) \$150.00		Payee address; City; State; Zip Code 2406 Manor Rd Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to County Democrats	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/01/2015		Payee name Worley Printing Co.			
Amount (\$) \$165.62		Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business cards	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	