

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

8611

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 13	
3 COMMITTEE NAME Community for Civil and Family Courthouse			OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 600 Congress Avenue Suite 3100 Austin, TX 78701		Date Received	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
	Mr.	Shannon	H.	
	NICKNAME	LAST	SUFFIX	
		Ratliff		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 600 Congress Avenue, Suite 3100 Austin, TX 78701			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 600 Congress Avenue, Suite 3100 Austin, TX 78701			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(512)	493-9600		
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 Limit	
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)	
		<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination	
10 PERIOD COVERED	Month Day Year 02/20/2015	THROUGH	Month Day Year 06/30/2015	
11 ELECTION	ELECTION DATE Month Day Year 11/03/2015		ELECTION TYPE	
			<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	<input type="checkbox"/> Other

GO TO PAGE 2

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME
Community for Civil and Family Courthouse

13 Filer ID

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME null	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # ELECTION DATE Month Day Year 11/03/2015	
		DESCRIPTION support 2015 County ballot measure for new courthouse	

15 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)	\$ 134,439.89
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 53.50
	4. TOTAL POLITICAL EXPENDITURES	\$ 55,830.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 79,829.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 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.

Shannon H. Ratliff
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Shannon H. Ratliff, this the 15th day of July, 2015, to certify which, witness my hand and seal of office

Barbara Bathurst Barbara Bathurst
Signature of officer administering oath Printed name of officer administering oath

BARBARA BATHURST
Notary Public, State of Texas
My Commission Expires
June 10, 2016

SUBTOTALS - SPAC

17 COMMITTEE NAME Community for Civil and Family Courthouse	18 Filer ID
---	--------------------

	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 130,100.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 4,339.89
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 2,500.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 50,298.94
9.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 5,531.94
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
12.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
13.	<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: 1/3 Rpt: 4/13
2 FILER NAME Community for Civil and Family Courthouse		3 Filer ID
4 Date 04/02/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews & Kurth LLP Texas PAC	7 Amount of Contribution (\$) \$10,000.00
6 Contributor address; City; State; Zip Code 500 Travis Ste. 4200 Houston, TX 77002		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Bar Foundation	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code 816 Congress Ave. Ste. 700 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Bar Foundation	Amount of Contribution (\$) \$40,000.00
Contributor address; City; State; Zip Code 816 Congress Ave. Ste. 700 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/10/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Bar Foundation	Amount of Contribution (\$) \$20,000.00
Contributor address; City; State; Zip Code 816 Congress Ave. Ste. 700 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves Dougherty Hearon & Moody PC	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code P.O. Box 98 Austin, TX 78767		
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: 2/3 Rpt: 5/13
2 FILER NAME Community for Civil and Family Courthouse		3 Filer ID
4 Date 04/15/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunton & Williams	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code 951 East Byrd St. Richmond, VA 23219-4074	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Walker L.L.P.	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 901 Main Street Suite 6000 Dallas, TX 75202	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Frank	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1601 Miriam Ave. #221 Austin, TX 78702	
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#: _____) Maples, Keith	Amount of Contribution (\$) \$450.00
	Contributor address; City; State; Zip Code 901 S Mopac Exwy II Ste 200 Austin, TX 78746	
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#: _____) Maples, Nikki	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 901 S. Mopac Expressway Austin, TX 78746	
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: 3/3 Rpt: 6/13
2 FILER NAME Community for Civil and Family Courthouse		3 Filer ID
4 Date 03/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McConnico, Steve	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 303 Colorado St #2400 Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff Law Firm, PLLC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code 600 Congress Ave. Ste. 3100 Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Douglass & McConnico LLP	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code 303 Colorado St. Suite 2400 Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson & Elkins Texas PAC	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code 2300 First City Tower Houston, TX 77002-6760	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winstead PC	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code 2728 N. Harwood St. Suite 500 Dallas, TX 78201	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 7/13	
2 FILER NAME Community for Civil and Family Courthouse		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/30/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Bar Association	8 Amount of contribution (\$) \$2,589.89	9 In-kind contribution description office space, copies and parking for campaign staff
7 Contributor address; City; State; Zip Code 816 Congress Ave. Ste. 700 Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Bar Association	Amount of contribution (\$) \$1,750.00	In-kind contribution description Staff time by Communications Director Nancy Gray
Contributor address; City; State; Zip Code 816 Congress Ave. Ste. 700 Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 8/13

2 FILER NAME
Community for Civil and Family Courthouse

3 Filer ID

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date
06/24/2015

6 Full name of pledgor out-of-state PAC (ID#: _____)
Law Office of Janet McCullar, P.C.

8 Amount of
pledge (\$)
\$2,500.00

9 In-kind description
(if applicable)

7 Pledgor Address; City; State; Zip Code

3200 Steck Ave #300

Austin, TX 78757

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 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: 1/4 Rpt: 9/13		2 FILER NAME Community for Civil and Family Courthouse		3 Filer ID	
4 Date 04/27/2015		5 Payee name Deux Tone			
6 Amount (\$) \$2,100.00		7 Payee address; City; State; Zip Code 518 Austin Ave. Waco, TX 76701			
8 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 design and maintenance	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/18/2015		Payee name Harland Clarke			
Amount (\$) \$131.44		Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256			
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 order fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/22/2015		Payee name Jeff Crosby Direct Mail			
Amount (\$) \$2,514.00		Payee address; City; State; Zip Code 902 E. 5th St., Ste. 103 Austin, TX 78702			
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 Printing	
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: 2/4 Rpt: 10/13		2 FILER NAME Community for Civil and Family Courthouse		3 Filer ID
4 Date 03/25/2015		5 Payee name Peter A. Ravella Consulting		
6 Amount (\$) \$6,000.00		7 Payee address; City; State; Zip Code 4107 Wildwood Rd. Austin, TX 78722		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 Genevieve Van Cleve consulting fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 03/25/2015		Payee name Peter A. Ravella Consulting		
Amount (\$) \$6,000.00		Payee address; City; State; Zip Code 4107 Wildwood Rd. Austin, TX 78722		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 Genevieve Van Cleve consulting fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 04/27/2015		Payee name Peter A. Ravella Consulting		
Amount (\$) \$6,000.00		Payee address; City; State; Zip Code 4107 Wildwood Rd. Austin, TX 78722		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 Genevieve Van Cleve consulting fee	
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: 3/4 Rpt: 11/13		2 FILER NAME Community for Civil and Family Courthouse		3 Filer ID	
4 Date 06/01/2015		5 Payee name Peter A. Ravella Consulting			
6 Amount (\$) \$6,000.00		7 Payee address; City; State; Zip Code 4107 Wildwood Rd. Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 Genevieve Van Cleve consulting fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/05/2015		Payee name Susan Harry Consulting, LLC			
Amount (\$) \$2,500.00		Payee address; City; State; Zip Code P.O. Box 301074 Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising and compliance consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/04/2015		Payee name Tulchin Research			
Amount (\$) \$18,000.00		Payee address; City; State; Zip Code 182 2nd Street, Suite 400 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Polling 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 polling	
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: 4/4 Rpt: 12/13	2 FILER NAME Community for Civil and Family Courthouse	3 Filer ID
--	--	-------------------

4 Date 03/05/2015	5 Payee name United States Treasury
-----------------------------	---

6 Amount (\$) \$850.00	7 Payee address; City; State; Zip Code P.O. Box 12192 Covington, KY 41012
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 501(c)(4) application fee
---------------------------------	---	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/22/2015	Payee name Women's Community Center
--------------------	--

Amount (\$) \$150.00	Payee address; City; State; Zip Code 1704 San Antonio St. Austin, TX 78701
-------------------------	--

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 for use of event space
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(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 F2: Sch: 1/1 Rpt: 13/13	2 FILER NAME Community for Civil and Family Courthouse	3 Filer ID
--	--	-------------------

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
--	----

5 Date 06/24/2015	6 Payee name Deux Tone
-----------------------------	----------------------------------

7 Amount (\$) \$5,198.35	8 Payee address; City; State; Zip Code 518 Austin Ave. Waco, TX 76701
------------------------------------	--

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 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 design and maintenance
----------------------------------	---	---

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/21/2015	Payee name Kelly Graphics
--------------------	------------------------------

Amount (\$) \$333.59	Payee address; City; State; Zip Code 1409 Quaker Ridge Dr. Austin, TX 78746
-------------------------	---

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

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 Printing
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------