# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8617

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID

2 Total pages filed: 35

**3 CANDIDATE / OFFICEHOLDER NAME**

MS / MRS / MR | FIRST: Brigid | MI

NICKNAME | LAST: Shea | SUFFIX

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE

2604 Geraghty Ave

Austin, TX 78757

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

**5 CAMPAIGN TREASURER NAME**

Text

MS / MRS / MR | FIRST: Dawn | MI

NICKNAME | LAST: Lew | SUFFIX

**6 CAMPAIGN TREASURER ADDRESS** (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

4509
Edgewood Dr
Austin, TX
78731

**7 CAMPAIGN TREASURER PHONE**

AREA CODE | PHONE NUMBER | EXTENSION

**8 REPORT TYPE**

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

**9 PERIOD COVERED**

Month Day Year: 01/01/2015 THROUGH Month Day Year: 06/30/2015

**10 ELECTION**

ELECTION DATE: Month Day Year

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other ☐ General ☐ Special

**11 OFFICE**

OFFICE HELD (if any): County Commissioner, Pct. 2

**12 OFFICE SOUGHT (if known)**

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2


| 13 C / OH NAME | Shea, Brigid | 14 Filer ID |
|---|---|---|

**15 NOTICE FROM POLITICAL COMMITTEE(S)**

☐ Additional Pages

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.

COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

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 | $ 40.00 |
| | 2. | **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 24,780.00 |
| EXPENDITURE TOTALS | 3. | TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED | $ 301.05 |
| | 4. | **TOTAL POLITICAL EXPENDITURES** | $ 22,750.53 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | $ 2,292.37 |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ 0.00 |

**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.

NOTARY PUBLIC STATE OF TEXAS
GEORGE A MYRICK
My Commission Expires
August 4, 2016
AFFIX NOTARY STAMP / SEAL ABOVE

Brigid Shea
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Brigid Shea, this the 15 day of July, 20 15, to certify which, witness my hand and seal of office.

George Myrick — GEORGE MYRICK — Notary
Signature of officer administering | Printed name of officer administering | Title of officer administering oath

# SUBTOTALS - C/OH

**FORM C/OH**
**COVER SHEET PG 3**


| **18** FILER NAME | **19** Filer ID |
|---|---|
| Shea, Brigid | |

| **20** SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | SUBTOTAL AMOUNT | |
|---|---|---|---|---|
| 1. | [X] | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | $ | 19,280.00 |
| 2. | [X] | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | $ | 5,500.00 |
| 3. | [ ] | SCHEDULE B: PLEDGED CONTRIBUTIONS | $ | |
| 4. | [ ] | SCHEDULE E: LOANS | $ | |
| 5. | [X] | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | $ | 22,021.67 |
| 6. | [ ] | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | $ | |
| 7. | [ ] | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | $ | |
| 8. | [X] | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | $ | 728.86 |
| 9. | [ ] | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | $ | |
| 10. | [ ] | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | $ | |
| 11. | [X] | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | $ | 100.00 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor / out-of-state PAC (ID#:) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/06/2015 | Altman, Duke | $100.00 |
| | 6 Contributor address; City; State; Zip Code: 9427 El Rey Blvd, Austin, TX 78737 | |
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/05/2015 | Armbrust & Brown, PLLC | $2,500.00 |
| | Contributor address; City; State; Zip Code: 100 Congress Ave Ste 1300, Austin, TX 78701-2744 | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Austin Travis County EMS Employee Association PAC | $500.00 |
| | Contributor address; City; State; Zip Code: 5817 Wilcab Rd Ste #3, Austin, TX 78721 | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/01/2015 | Baker, Harris | $1,000.00 |
| | Contributor address; City; State; Zip Code: 5000 Ridge Oak Dr, Austin, TX 78731-4728 | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 03/27/2015 | Ballouz, Hall Nasr | $500.00 |
| | Contributor address; City; State; Zip Code: 3405 Bee Creek Rd, Spicewood, TX 78669-6528 | |
| 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: 2/11 Rpt: 5/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/08/2015 | Bender, Hugh & Sandi | $100.00 |
| | 6 Contributor address; City; State; Zip Code: 802 Harris Ave, Austin, TX 78705 | |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Consultant | Self-Employed |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/10/2015 | Bunch, William | $100.00 |
| | Contributor address; City; State; Zip Code: 1307 Oxford Ave, Austin, TX 78704 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | Save Our Springs Alliance |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Chenoweth, Dale | $25.00 |
| | Contributor address; City; State; Zip Code: PO Box 2445, Austin, TX 78768 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Medical Writer | Self-Employed |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Clark, James Jolly | $25.00 |
| | Contributor address; City; State; Zip Code: PO Box 303155, Austin, TX 78703 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/15/2015 | Davis, Ron | $100.00 |
| | Contributor address; City; State; Zip Code: PO Box 16665, Austin, TX 78761 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Commisioner | Travis County |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/07/2015 | DePalma, Richard | $100.00 |
| | 6 Contributor address; City; State; Zip Code: 7821 Wisteria Valley Dr, Austin, TX 78739 | |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Consultant | Strategic Partnerships, Inc. |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/08/2015 | Delozier, Abbe | $100.00 |
| | Contributor address; City; State; Zip Code: 10708 Regal Oaks Dr, Austin, TX 78737 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Realtor | Self-Employed |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Deyoung, Claire | $50.00 |
| | Contributor address; City; State; Zip Code: 4612 Red River St, Austin, TX 78751-3227 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Echols, Catharine | $25.00 |
| | Contributor address; City; State; Zip Code: 508 Harris Ave, Austin, TX 78705 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/10/2015 | Garcia, Gustavo | $100.00 |
| | Contributor address; City; State; Zip Code: 7401 Ophelia Dr, Austin, TX 78752-2135 | |

| 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: 4/11 Rpt: 7/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor / out-of-state PAC (ID#:) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Gibbons, Heidi | $50.00 |
| | 6 Contributor address; City; State; Zip Code: 613 Hearn St, Austin, TX 78703-4517 | |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Graham, Ann S. | $60.00 |
| | Contributor address; City; State; Zip Code: 3815 Avenue H, Austin, TX 78751 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Arts Administrator | Self-Employed |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Gregory, Bob & Kay | $500.00 |
| | Contributor address; City; State; Zip Code: 2939 Westlake Cv, Austin, TX 78746 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| CEO | Texas Disposal Systems |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/02/2015 | Gregory, Bob & Kay | $1,000.00 |
| | Contributor address; City; State; Zip Code: 2939 Westlake Cv, Austin, TX 78746 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| CEO | Texas Disposal Systems |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Guthikonda, Gopal | $100.00 |
| | Contributor address; City; State; Zip Code: PO Box 200388, Austin, TX 78720-0388 | |

| 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: 5/11 Rpt: 8/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor / 6 Contributor address; City; State; Zip Code | 7 Amount of Contribution ($) | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|---|---|---|
| 01/09/2015 | ☐ out-of-state PAC (ID#:_____)<br>Halpin, Richard<br>7107 Stone Ledge Cir<br>Austin, TX 78736-1931 | $50.00 | | |
| 01/09/2015 | ☐ out-of-state PAC (ID#:_____)<br>Harkey, Beverly Childress<br>2601 Albata Ave<br>Austin, TX 78757-2104 | $50.00 | | |
| 02/02/2015 | ☐ out-of-state PAC (ID#:_____)<br>Hartman, Greg<br>3307 Winding Creek Dr<br>Austin, TX 78735 | $500.00 | Healthcare Administrator | Seton Healthcare |
| 01/15/2015 | ☐ out-of-state PAC (ID#:_____)<br>Hegemier, Tom<br>2522 Stagecoach Ranch Rd<br>Dripping Springs, TX 78620-2310 | $100.00 | | |
| 03/26/2015 | ☐ out-of-state PAC (ID#:_____)<br>Holderness, Macy<br>2943 Thousand Oaks Dr<br>Austin, TX 78746-7661 | $150.00 | | |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Jimenez, Manuel | $30.00 |
| | 6 Contributor address; City; State; Zip Code: 7516 Cedar Edge Dr, Austin, TX 78744 | |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Peace Officer | Travis County Constable PCT 4 |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Kimmelman, Tamara | $25.00 |
| | Contributor address; City; State; Zip Code: 6910 Hart Ln #609, Austin, TX 78731 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Physical Therapy | Austin School District |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Lopez, Carlos | $50.00 |
| | Contributor address; City; State; Zip Code: 10305 James Ryan Way, Austin, TX 78730 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/06/2015 | Lorenz, Perry | $2,500.00 |
| | Contributor address; City; State; Zip Code: 1311-A E 6th St, Austin, TX 78702 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Real Estate | Self-Employed |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/06/2015 | Lorenz, Perry | $2,500.00 |
| | Contributor address; City; State; Zip Code: 1311-A E 6th St, Austin, TX 78702 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Real Estate | Self-Employed |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/08/2015 | McNamara, Dan | $100.00 |
| | 6 Contributor address; City; State; Zip Code: 3502 Bridle Path, Austin, TX 78703 | |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Attorney, Investor | Self-Employed |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Meade, Nikelle S. | $1,000.00 |
| | Contributor address; City; State; Zip Code: 5263 Austral Loop, Austin, TX 78739 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/15/2015 | Meador, Marlene | $125.00 |
| | Contributor address; City; State; Zip Code: 6905 Shoal Creek Blvd, Austin, TX 78757-4383 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Mike Tolleson & Associates, Inc. | $50.00 |
| | Contributor address; City; State; Zip Code: 2106 E Martin Luther King Jr Blvd, Austin, TX 78702-1342 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Moody, Keith | $100.00 |
| | Contributor address; City; State; Zip Code: 9509 Derecho Bnd, Austin, TX 78737 | |

| 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: 8/11 Rpt: 11/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/15/2015 | Morrison, Susan G.<br>6 Contributor address; City; State; Zip Code<br>6005 Shoalwood Ave<br>Austin, TX 78757 | $50.00 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Attorney | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Nazor, Craig<br>Contributor address; City; State; Zip Code<br>11701 Barchetta Dr<br>Austin, TX 78758-3762 | $100.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Doctor | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Oakey, Bill<br>Contributor address; City; State; Zip Code<br>1507 Elton Ln Unit B<br>Austin, TX 78703 | $25.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Retired | Retired |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/15/2015 | Ping, Ping<br>Contributor address; City; State; Zip Code<br>5404 Rain Creek Pkwy<br>Austin, TX 78759 | $100.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Artist | Self-Employed |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/14/2015 | Reis, Brian<br>Contributor address; City; State; Zip Code<br>6516 Rotan Dr<br>Austin, TX 78749 | $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: 9/11 Rpt: 12/35

**2** FILER NAME: Shea, Brigid

**3** Filer ID:

| **4** Date | **5** Full name of contributor ☐ out-of-state PAC (ID#:_____) | **7** Amount of Contribution ($) |
|---|---|---|
| 01/08/2015 | Reynolds, Joseph | $250.00 |
| | **6** Contributor address; City; State; Zip Code: 2611 W 49th St, Austin, TX 78731 | |
| **8** Principal occupation / Job title (See Instructions): Research | **9** Employer (See Instructions): Retired | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/08/2015 | Richmond, Karin | $250.00 |
| | Contributor address; City; State; Zip Code: 1343 Spyglass Dr, Austin, TX 78746 | |
| Principal occupation / Job title (See Instructions): Tax Consultant | Employer (See Instructions): Self-Employed | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/07/2015 | Rodgers, Brian | $500.00 |
| | Contributor address; City; State; Zip Code: 1112 W 9th St, Austin, TX 78703 | |
| Principal occupation / Job title (See Instructions): Real Estate | Employer (See Instructions): Rodgers & Reichle, Inc | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/02/2015 | Schneider, Robin | $100.00 |
| | Contributor address; City; State; Zip Code: 2609 Sherwood Ln, Austin, TX 78704 | |
| Principal occupation / Job title (See Instructions): Organizer | Employer (See Instructions): Texas Campaign for the Environment | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Siff, Theodore | $100.00 |
| | Contributor address; City; State; Zip Code: 604 W 11th St, Austin, TX 78701 | |
| 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: 10/11 Rpt: 13/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor / out-of-state PAC (ID#:) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Smith, David N.<br>6 Contributor address; City; State; Zip Code<br>PO Box 537<br>Austin, TX 78767-0537 | $25.00 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Attorney | Self-Employed |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/19/2015 | Stanley, Alfred<br>Contributor address; City; State; Zip Code<br>PO Box 5674<br>Austin, TX 78763 | $100.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Consultant | Self-Employed |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Travis County Sheriff's Officers Association PAC<br>Contributor address; City; State; Zip Code<br>400 W 14th St Ste 220<br>Austin, TX 78701 | $1,500.00 |

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

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/02/2015 | Warth, Dan<br>Contributor address; City; State; Zip Code<br>2716 Rio Mesa Dr<br>Austin, TX 78732-1937 | $350.00 |

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

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Weigand, Ingrid<br>Contributor address; City; State; Zip Code<br>704 W Gibson St<br>Austin, TX 78704 | $50.00 |

| 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: 11/11 Rpt: 14/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

| 4 Date | 5 Full name of contributor / out-of-state PAC (ID#:) | 7 Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Wickert, Julie | $50.00 |
| | 6 Contributor address; City; State; Zip Code: 8303 Polar Dr, Austin, TX 78757 | |
| 8 Principal occupation / Job title (See Instructions): | 9 Employer (See Instructions): | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Wilson, J. Travis | $100.00 |
| | Contributor address; City; State; Zip Code: 1807 Spring Valley Dr, Dripping Springs, TX 78620 | |
| Principal occupation / Job title (See Instructions): | Employer (See Instructions): | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Woods, Gail | $25.00 |
| | Contributor address; City; State; Zip Code: 2809 Desoto Cir, Austin, TX 78733 | |
| Principal occupation / Job title (See Instructions): Paralegal | Employer (See Instructions): Texas Attorney General | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/06/2015 | Zeller, Charles | $1,000.00 |
| | Contributor address; City; State; Zip Code: 811 N Tumbleweed Trl, Austin, TX 78733 | |
| Principal occupation / Job title (See Instructions): N/A | Employer (See Instructions): N/A | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 01/09/2015 | Zeugin, Sharon | $100.00 |
| | Contributor address; City; State; Zip Code: 2104 Wright St, Austin, TX 78704-2834 | |
| 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: 15/35

2 FILER NAME: Shea, Brigid

3 Filer ID:

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS: $

| 5 Date | 6 Full name of contributor / out-of-state PAC (ID#:) | 8 Amount of contribution ($) | 9 In-kind contribution description |
|---|---|---|---|
| 01/09/2015 | Barr Mansion | $4,000.00 | Event venue expenses |
| | 7 Contributor address; City; State; Zip Code: 10463 Sprinkle Rd, Austin, TX 78754 | ☐ 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 | Full name of contributor / out-of-state PAC (ID#:) | Amount of contribution ($) | In-kind contribution description |
|---|---|---|---|
| 01/03/2015 | Deep Eddy Vodka | $500.00 | Beverages for event |
| | Contributor address; City; State; Zip Code: Hwy 290, Dripping Springs, TX 78620 | ☐ 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) | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of contribution ($) | In-kind contribution description |
|---|---|---|---|
| 01/09/2015 | Salt Lick Bar-B-Q | $1,000.00 | Wine for event |
| | Contributor address; City; State; Zip Code: 18300 FM 1826, Driftwood, TX 78619 | ☐ 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) | |

# 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 1/17 Rpt: 16/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 05/06/2015 | ActBlue |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $20.00 | 366 Summer St<br>Somerville, MA 02144 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Political contribution |

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

| Date | Payee name |
|---|---|
| 05/06/2015 | ActBlue |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $200.00 | 366 Summer St<br>Somerville, MA 02144 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Political contribution |

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

| Date | Payee name |
|---|---|
| 01/09/2015 | Barr Mansion |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $260.00 | 10463 Sprinkle Rd<br>Austin, TX 78754 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Gratuity for event servers |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 2/17 Rpt: 17/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 01/09/2015 | Casey Chapman Ross Photography |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $649.50 | 1202 Folts Ave<br>Austin, TX 78704 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Photography for event |

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

| Date | Payee name |
|---|---|
| 01/09/2015 | Counts, Diane |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $63.37 | 1508 Arcadia Ave<br>Austin, TX 78757 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Sponsor signs for event |

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

| Date | Payee name |
|---|---|
| 01/09/2015 | Counts, Diane |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $200.00 | 1508 Arcadia Ave<br>Austin, TX 78757 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Salaries/Wages/Contract Labor | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Salary |

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

**The Instruction Guide explains how to complete this form.**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 3/17 Rpt: 18/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 01/21/2015 | David Thomas Photography |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $150.00 | 2004-B E 9th St<br>Austin, TX 78702 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Photography for swearing in |

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

| Date | Payee name |
|---|---|
| 02/16/2015 | David Thomas Photography |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $35.30 | 2004-B E 9th St<br>Austin, TX 78702 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Photography |

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

| Date | Payee name |
|---|---|
| 02/16/2015 | David Thomas Photography |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $834.94 | 2004-B E 9th St<br>Austin, TX 78702 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Photography |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 4/17 Rpt: 19/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 01/08/2015 | Democracy Engine LLC |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $3.95 | 850 Quincy St<br>Washington, DC 20011 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Accounting/Banking | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit card processing fees |

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

| Date | Payee name |
|---|---|
| 01/15/2015 | Democracy Engine LLC |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $236.81 | 850 Quincy St<br>Washington, DC 20011 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Accounting/Banking | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit card processing fees |

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

| Date | Payee name |
|---|---|
| 02/12/2015 | Democracy Engine LLC |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $18.95 | 850 Quincy St<br>Washington, DC 20011 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Accounting/Banking | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit card processing fees |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 5/17 Rpt: 20/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 01/17/2015 | Dynamite Industries |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $175.00 | 2513 E 6th St Unit A<br>Austin, TX 78703 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Consulting Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Phone & IT support |

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

| Date | Payee name |
|---|---|
| 01/24/2015 | Dynamite Industries |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $200.00 | 2513 E 6th St Unit A<br>Austin, TX 78703 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Consulting Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Computer system upgrade |

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

| Date | Payee name |
|---|---|
| 01/20/2015 | Gloria's Restaurant |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $15.90 | 300 W 6th St<br>Austin, TX 78701 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food and beverage for meeting |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 6/17 Rpt: 21/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 01/23/2015 | Gloria's Restaurant |
| **6** Amount ($) $60.29 | **7** Payee address; City; State; Zip Code<br>300 W 6th St<br>Austin, TX 78701 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food and beverage for meeting |

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

| Date | Payee name |
|---|---|
| 02/04/2015 | Gloria's Restaurant |
| Amount ($) $13.90 | Payee address; City; State; Zip Code<br>300 W 6th St<br>Austin, TX 78701 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food and beverage for meeting |

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

| Date | Payee name |
|---|---|
| 02/23/2015 | Gloria's Restaurant |
| Amount ($) $32.58 | Payee address; City; State; Zip Code<br>300 W 6th St<br>Austin, TX 78701 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food and beverage for meeting |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 7/17 Rpt: 22/35 | Shea, Brigid | |

**Entry 1**

| 4 Date | 5 Payee name |
|---|---|
| 03/25/2015 | Gloria's Restaurant |
| **6** Amount ($) | **7** Payee address; City; State; Zip Code |
| $23.25 | 300 W 6th St<br>Austin, TX 78701 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food and beverage for meeting |

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

**Entry 2**

| Date | Payee name |
|---|---|
| 05/19/2015 | Gusto Italian Kitchen |
| Amount ($) | Payee address; City; State; Zip Code |
| $134.75 | 4800 Burnet Rd<br>Austin, TX 78756 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for team meeting |

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

**Entry 3**

| Date | Payee name |
|---|---|
| 04/07/2015 | HEB |
| Amount ($) | Payee address; City; State; Zip Code |
| $6.00 | 5808 Burnet Rd<br>Austin, TX 78756 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

**The Instruction Guide explains how to complete this form.**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 8/17 Rpt: 23/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 04/07/2015 | HEB |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $25.10 | 5808 Burnet Rd<br>Austin, TX 78756 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

| Date | Payee name |
|---|---|
| 05/14/2015 | HEB |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $57.46 | 5808 Burnet Rd<br>Austin, TX 78756 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

| Date | Payee name |
|---|---|
| 06/22/2015 | HEB |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $48.53 | 5808 Burnet Rd<br>Austin, TX 78756 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

**The Instruction Guide explains how to complete this form.**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 9/17 Rpt: 24/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 06/24/2015 | HEB |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $6.11 | 5808 Burnet Rd<br>Austin, TX 78756 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

| Date | Payee name |
|---|---|
| 06/24/2015 | HEB |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $26.02 | 5808 Burnet Rd<br>Austin, TX 78756 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

| Date | Payee name |
|---|---|
| 03/31/2015 | HostMonster |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $215.64 | 560 Timpanogos Pkwy<br>Orem, UT 84097 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Advertising Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Website hosting fees |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 10/17 Rpt: 25/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 04/01/2015 | HostMonster |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $50.75 | 560 Timpanogos Pkwy<br>Orem, UT 84097 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Advertising Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Website hosting fees |

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

| Date | Payee name |
|---|---|
| 01/09/2015 | Hughes, William |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $250.00 | 1009 Hillside Oaks Dr<br>Austin, TX 78745 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Salaries/Wages/Contract Labor | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Salary |

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

| Date | Payee name |
|---|---|
| 06/08/2015 | Hughes, William |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $100.00 | 1009 Hillside Oaks Dr<br>Austin, TX 78745 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Salaries/Wages/Contract Labor | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Salary |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 11/17 Rpt: 26/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 03/06/2015 | I Live Here, I Give Here |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $500.00 | 98 San Jacinto St<br>Austin, TX 78701 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Charitable contributions for Amplify Austin |

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

| Date | Payee name |
|---|---|
| 01/09/2015 | Jones, Maguerite |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $200.00 | 512 Eberhart Ln #507<br>Austin, TX 78745 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Event support |

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

| Date | Payee name |
|---|---|
| 04/23/2015 | Jones, Marguerite |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $203.02 | 512 Eberhart Ln #507<br>Austin, TX 78745 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Swearing in event support |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 12/17 Rpt: 27/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 03/10/2015 | League of Women Voters of the Austin Area |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $145.00 | 1011 W 31st St #510<br>Austin, TX 78705 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Charitable contribution |

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

| Date | Payee name |
|---|---|
| 01/09/2015 | North by Northwest |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $135.30 | 10010 Capital of TX Hwy N<br>Austin, TX 78759 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food and beverage for group meeting for event |

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

| Date | Payee name |
|---|---|
| 01/08/2015 | North by Northwest |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $100.00 | 10010 Capital of TX Hwy N<br>Austin, TX 78759 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Deposit for event beverages |

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

**The Instruction Guide explains how to complete this form.**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 13/17 Rpt: 28/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 01/06/2015 | Office Depot |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $20.78 | 2620 W Anderson Ln<br>Austin, TX 78757 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Solicitation/Fundraising Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Supplies for fundraiser |

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

| Date | Payee name |
|---|---|
| 01/09/2015 | Patterson, Robert |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $800.00 | 4110 Guadalupe St<br>Austin, TX 78751 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Dancers for event |

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

| Date | Payee name |
|---|---|
| 04/10/2015 | People's Community Clinic |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $120.00 | 2909 North IH-35<br>Austin, TX 78722 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Charitable contribution |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 14/17 Rpt: 29/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 02/23/2015 | Sarah Eckhardt Campaign |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $500.00 | 3110 Manor Rd Ste A<br>Austin, TX 78723 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Swearing in expense reimbursement |

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

| Date | Payee name |
|---|---|
| 01/15/2015 | Shea, Brigid |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $5,000.00 | 2604 Geraghty St<br>Austin, TX 78757 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Loan Repayment/Reimbursement | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Personal loan repayment |

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

| Date | Payee name |
|---|---|
| 01/17/2015 | Shea, Brigid |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $5,000.00 | 2604 Geraghty Ave<br>Austin, TX 78757 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Loan Repayment/Reimbursement | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Personal loan repayment |

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

**The Instruction Guide explains how to complete this form.**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 15/17 Rpt: 30/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 04/13/2015 | Shea, Brigid |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $2,796.98 | 2604 Geraghty Ave<br>Austin, TX 78757 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Loan Repayment/Reimbursement | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Personal loan repayment |

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

| Date | Payee name |
|---|---|
| 04/03/2015 | Travis County Democratic Party |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $10.00 | 1311 E 6th St Ste B<br>Austin, TX 78702 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Political contribution |

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

| Date | Payee name |
|---|---|
| 05/03/2015 | Travis County Democratic Party |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $10.00 | 1311 E 6th St Ste B<br>Austin, TX 78702 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Political contribution |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 16/17 Rpt: 31/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 05/06/2015 | Travis County Democratic Party |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $500.00 | 1311 E 6th St Ste B<br>Austin, TX 78702 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Political sponsorship |

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

| Date | Payee name |
|---|---|
| 06/03/2015 | Travis County Democratic Party |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $10.00 | 1311 E 6th St Ste B<br>Austin, TX 78702 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Contributions/Donations Made By Candidate/Officeholder/Political Committee | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Political contribution |

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

| Date | Payee name |
|---|---|
| 02/22/2015 | Vitale, Catharine |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $500.00 | 7610 Cameron Rd #20551<br>Austin, TX 78752 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Salaries/Wages/Contract Labor | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Salary |

| 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: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 17/17 Rpt: 32/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 06/25/2015 | Wholefoods Culinary Center and Catering |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $714.45 | 525 N Lamar Blvd<br><br>Austin, TX 78703 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Event Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Food for event |

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

| Date | Payee name |
|---|---|
| 05/06/2015 | Worley Printing |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $340.99 | 3217 North IH-35<br><br>Austin, TX 78722 |

| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Printing Expense | ☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense<br>Printing campaign materials |

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

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**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 G: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 1/2 Rpt: 33/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 02/20/2015 | ADP Financial Services |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $150.00 | 8601 RR 2222 |
| [X] Reimbursement from political contributions intended | Austin, TX 78730 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Accounting/Banking | [ ] Check if travel outside of Texas. Complete Schedule T.<br>[ ] Check if Austin, TX, officeholder living expense<br>Tax forms for campaign staff members |

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

| Date | Payee name |
|---|---|
| 02/20/2015 | Anderson CPA, Leslie J. |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $500.00 | 4425 S Mopac Expwy Bldg 3 Ste 401 |
| [X] Reimbursement from political contributions intended | Austin, TX 78735 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Accounting/Banking | [ ] Check if travel outside of Texas. Complete Schedule T.<br>[ ] Check if Austin, TX, officeholder living expense<br>Tax preparation |

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

| Date | Payee name |
|---|---|
| 03/23/2015 | Casa Chapala Mexican Grill & Catering |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $13.84 | 9041 Research Blvd |
| [X] Reimbursement from political contributions intended | Austin, TX 78758 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Food/Beverage Expense | [ ] Check if travel outside of Texas. Complete Schedule T.<br>[ ] Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**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 G: | 2 FILER NAME | 3 Filer ID |
|---|---|---|
| Sch: 2/2 Rpt: 34/35 | Shea, Brigid | |

| 4 Date | 5 Payee name |
|---|---|
| 03/23/2015 | Casa Chapala Mexican Grill & Catering |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $6.41 | 9041 Research Blvd |
| [X] Reimbursement from political contributions intended | Austin, TX 78758 |

| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|---|---|---|
| | Food/Beverage Expense | [ ] Check if travel outside of Texas. Complete Schedule T.<br>[ ] Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

| Date | Payee name |
|---|---|
| 04/20/2015 | Casa Chapala Mexican Grill & Catering |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $9.61 | 9041 Research Blvd |
| [X] Reimbursement from political contributions intended | Austin, TX 78758 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Food/Beverage Expense | [ ] Check if travel outside of Texas. Complete Schedule T.<br>[ ] Check if Austin, TX, officeholder living expense<br>Food for meeting |

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

| Date | Payee name |
|---|---|
| 03/01/2015 | Office Max |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $49.00 | 2620 W Anderson Ln |
| [X] Reimbursement from political contributions intended | Austin, TX 78757 |

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
|---|---|---|
| | Solicitation/Fundraising Expense | [ ] Check if travel outside of Texas. Complete Schedule T.<br>[ ] Check if Austin, TX, officeholder living expense<br>Postage for campaign correspondence |

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

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

**SCHEDULE K**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule K:
Sch: 1/1 Rpt: 35/35

**2** FILER NAME
Shea, Brigid

**3** Filer ID

**4** Date
01/15/2015

**5** Name of person from whom amount is received
North by Northwest

**6** Address of person from whom amount is received; City; State; Zip Code
10010 N Capital of Texas Hwy

Austin, TX 78759

**8** Amount ($)
$100.00

**7** Purpose for which amount is received
deposit for beverages for event

☐ Check if political contribution returned to filer