CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8886

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

2016 JUL 15 AM 12

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

5 CAMPAIGN TREASURER NAME

MS / MRS / MR   FIRST: Dawn   MI:

NICKNAME   LAST: Lewis   SUFFIX:

6 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

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

4509 Edgemont Dr
Austin, TX 78731

7 CAMPAIGN TREASURER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

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   01/01/2016   THROUGH   Month Day Year   06/30/2016

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

13 C / OH NAME	Shea, Brigid	14 Filer ID	

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

☐ Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	
	COMMITTEE ADDRESS
☐ SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$	0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$	1,000.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$	458.23
	4.	**TOTAL POLITICAL EXPENDITURES**	$	9,797.48
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$	287.17
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$	0.00

17 AFFADAVIT

ERRICH PETERSEN
My Commission Expires
June 12, 2017

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.
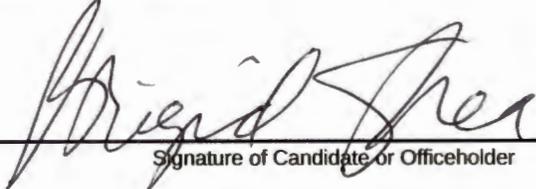
_____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _Brigid Shea_, this the _15th_ day of _July_, 20_16_, to certify which, witness my hand and seal of office.

_____	_Errich Petersen_	_Notary Public_
Signature of officer administering	Printed name of officer administering	Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME
Shea, Brigid

19 Filer ID

20 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

		NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 1,000.00
2.	[ ]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	[ ]	SCHEDULE E: LOANS	$
5.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$ 4,791.29
6.	[ ]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7.	[ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$
8.	[ ]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9.	[X]	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	$ 5,006.19
10.	[ ]	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11.	[ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
12.	[ ]	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: 1/1 Rpt: 4/12

2 FILER NAME	3 Filer ID
Shea, Brigid	

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/18/2016	Getter, Kerry	$1,000.00
	6 Contributor address; City; State; Zip Code	
	9301 Johnny Morris Rd	
	Austin, TX 78724	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Owner	Balcones Recycling

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 1/3 Rpt: 5/12	Shea, Brigid	

4 Date	5 Payee name
03/08/2016	Annie's List

6 Amount ($)	7 Payee address; City; State; Zip Code
$150.00	630 W 34th St #302 Austin, TX 78705

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Political contribution

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

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Date	Payee name
02/08/2016	Black Austin Democrats

Amount ($)	Payee address; City; State; Zip Code
$500.00	4717 Heflin Ln Austin, TX 78721

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Political contribution

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

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Date	Payee name
03/31/2016	HostMonster

Amount ($)	Payee address; City; State; Zip Code
$227.64	560 Timpanogos Pkwy Orem, UT 84097

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Advertising Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
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

1 Total pages Schedule F1: Sch: 2/3 Rpt: 6/12	2 FILER NAME Shea, Brigid	3 Filer ID

4 Date 01/13/2016	5 Payee name Shea, Brigid (Commissioner)
6 Amount ($) $2,516.47	7 Payee address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757

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

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

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Date 02/20/2016	Payee name Sierra Club Lone Star Chapter
Amount ($) $270.00	Payee address; City; State; Zip Code 1202 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 ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Charitable contribution

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

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Date 01/16/2016	Payee name The Driskill Hotel F&B
Amount ($) $168.95	Payee address; City; State; Zip Code 604 Brazos St Austin, TX 78701

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

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 3/3 Rpt: 7/12	Shea, Brigid	

4 Date	5 Payee name
01/16/2016	Vitale, Catharine

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00	909 Payne Ave Austin, TX 78757

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

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

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

1 Total pages Schedule G: Sch: 1/4 Rpt: 8/12	2 FILER NAME Shea, Brigid	3 Filer ID

4 Date 05/28/2016	5 Payee name American Express

6 Amount ($) $5.75 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O.Box 981540 El Paso, TX 79998-1540

8 **PURPOSE OF EXPENDITURE**	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Flight insurance

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

Date 05/28/2016	Payee name American Express

Amount ($) $4.99 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O.Box 981540 El Paso, TX 79998-1540

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Flight insurance

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

Date 05/04/2016	Payee name Casa de Luz

Amount ($) $12.00 ☒ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1701 Toomey Rd Austin, TX 78704

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense 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	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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID
Sch: 2/4 Rpt: 9/12	Shea, Brigid	

4 Date	5 Payee name
04/04/2016	Chase Bank

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00	221 W Sixth St
[X] Reimbursement from political contributions intended	Austin, TX 78701

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense To cover banking and expenses for April through July

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

Date	Payee name
06/23/2016	Hyatt Regency

Amount ($)	Payee address; City; State; Zip Code
$1,179.40	1255 Jeanne-Mance
[ ] Reimbursement from political contributions intended	Montreal Quebec H5B1E5 Canada

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense To attend New Cities Summit

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

Date	Payee name
06/16/2016	La Quinta Inn

Amount ($)	Payee address; City; State; Zip Code
$301.23	100 W. Cesar Chavez Blvd
[ ] Reimbursement from political contributions intended	San Antonio, TX 78204

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense To attend state Democratic convention

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	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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/4 Rpt: 10/12	2 FILER NAME Shea, Brigid	3 Filer ID

4 Date 03/09/2016	5 Payee name League of Women Voters of the Austin Area

6 Amount ($) $605.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1011 W 31st St #510 Austin, TX 78705

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

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

Date 03/25/2016	Payee name Nationbuilder

Amount ($) $588.00 ☒ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 448 S Hill St Ste 200 Los Angeles, CA 90013

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Website maintenance

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

Date 05/28/2016	Payee name Orbitz

Amount ($) $284.75 ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code 108th Ave N.E. Bellevue, WA 98004

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description ☒ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Airfare to conference

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	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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID
Sch: 4/4 Rpt: 11/12	Shea, Brigid	

4 Date	5 Payee name
05/28/2016	Orbitz

6 Amount ($)	7 Payee address; City; State; Zip Code
$230.07	108th Ave N.E.
☐ Reimbursement from political contributions intended	Bellevue, WA 98004

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description [X] Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense To attend conference

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

Date	Payee name
03/06/2016	South by Southwest Interactive

Amount ($)	Payee address; City; State; Zip Code
$1,295.00	PO Box 685289
[X] Reimbursement from political contributions intended	Austin, TX 78768

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Conference entry	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense To attend SXSW Interactive conference

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

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule T: Sch: 1/1 Rpt: 12/12

2 FILER NAME Shea, Brigid	**3** Filer ID

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Orbitz

5 Contribution / Expenditure reported on:

[ ] Schedule A2	[ ] Schedule B	[ ] Schedule B(J)	[ ] Schedule C2	[ ] Schedule D	[ ] Schedule F1
[ ] Schedule F2	[ ] Schedule F4	[X] Schedule G	[ ] Schedule H	[ ] Schedule COH-UC	[ ] Schedule B - SS

6 Dates of Travel	**7** Name of person(s) traveling Brigid, Shea (Commissioner)
06/18/2016	**8** Departure city or name of departure location Austin
06/18/2016	**9** Destination city or name of destination location Montreal

10 Means of transportation Commercial Airplane	**11** Purpose of travel (including name of conference, seminar, or other event) To attend New Cities Summit

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Orbitz

Contribution / Expenditure reported on:

[ ] Schedule A2	[ ] Schedule B	[ ] Schedule B(J)	[ ] Schedule C2	[ ] Schedule D	[ ] Schedule F1
[ ] Schedule F2	[ ] Schedule F4	[X] Schedule G	[ ] Schedule H	[ ] Schedule COH-UC	[ ] Schedule B - SS

Dates of Travel	Name of person(s) traveling Shea, Brigid (Commissioner)
06/23/2016	Departure city or name of departure location Montreal
06/23/2016	Destination city or name of destination location Austin

Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) To attend New Cities Summit