

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

8994

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 23	
3 COMMITTEE NAME Friends of North Shore Fire Department			OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1505 Jackie Robinson Pl Round Rock, TX 78665			Date Received	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR	FIRST	MI
			Michael	C
		NICKNAME	LAST	SUFFIX
			Johnson	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
		1505 Jackie Robinson Pl		Round Rock TX 78665
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
		1505 Jackie Robinson Pl		Round Rock TX 78665
8 CAMPAIGN TREASURER PHONE		AREA CODE	PHONE NUMBER	EXTENSION
			512-740-3108	
9 REPORT TYPE		<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 Limit
		<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Dissolution (Attach PAC-DR)
			<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination
10 PERIOD COVERED		Month Day Year	THROUGH	Month Day Year
		11/01/2016		12/31/2016
11 ELECTION		ELECTION DATE	ELECTION TYPE	
		Month Day Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		11/08/2016	<input type="checkbox"/> General	<input type="checkbox"/> Special

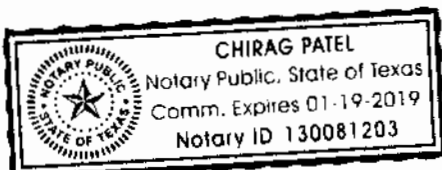
GO TO PAGE 2

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

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Friends of North Shore Fire Department		13 Filer ID																		
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)																		
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # Prop 1	ELECTION DATE Month Day Year 11/08/2016																	
		DESCRIPTION Emergency Service District Overlay, ESD # 7 Fire Department																		
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">15 CONTRIBUTION TOTALS</td> <td style="width:55%;">1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</td> <td style="width:20%; text-align: right;">\$ 337.41</td> </tr> <tr> <td></td> <td>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</td> <td style="text-align: right;">\$ 4,927.41</td> </tr> <tr> <td style="border-top: 1px dashed black;">EXPENDITURE TOTALS</td> <td>3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td></td> <td>4. TOTAL POLITICAL EXPENDITURES</td> <td style="text-align: right;">\$ 4,927.41</td> </tr> <tr> <td style="border-top: 1px dashed black;">CONTRIBUTION BALANCE</td> <td>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td style="border-top: 1px dashed black;">OUTSTANDING LOAN TOTALS</td> <td>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</td> <td style="text-align: right;">\$ 0.00</td> </tr> </table>			15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 337.41		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,927.41	EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00		4. TOTAL POLITICAL EXPENDITURES	\$ 4,927.41	CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00	OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 337.41																		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,927.41																		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00																		
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,927.41																		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00																		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00																		

16 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Michael C. Johnson

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Michael C. Johnson, this the 17th day of January, 20 17, to certify which, witness my hand and seal of office.

Chirag Patel

Signature of officer administering oath
Chirag Patel

Printed name of officer administering oath
Notary Public, State of Texas

Title of officer administering oath

SUBTOTALS - SPAC

17 COMMITTEE NAME Friends of North Shore Fire Department	18 Filer ID
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19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,927.41
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,927.41
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/17 Rpt: 4/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 12/02/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Taylor	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 12525 Enchanted Forest Dr Austin, TX 78727		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Taylor	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 12525 Enchanted Forest Dr Austin, TX 78727		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Taylor	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 12525 Enchanted Forest Dr Austin, TX 78727		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Charles	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 21118 Highland Lake Dr # 2 Lago Vista, TX 78645		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Charles	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 21118 Highland Lake Dr # 2 Lago Vista, TX 78645		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/17 Rpt: 5/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Charles	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 21118 Highland Lake Dr # 2 Lago Vista, TX 78645		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tim	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 609 Highcrest Dr # 112 Granite Shoals, TX 78654		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tim	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 609 Highcrest Dr # 112 Granite Shoals, TX 78654		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Tim	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 609 Highcrest Dr # 112 Granite Shoals, TX 78654		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Condit, Dustin	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 13304 Ivywood Cv Austin, TX 78729		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/17 Rpt: 6/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Condit, Dustin	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 13304 Ivywood Cv Austin, TX 78729		
8 Principal occupation / Job title (See Instructions) Firefighter		
		9 Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Condit, Dustin	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 13304 Ivywood Cv Austin, TX 78729		
Principal occupation / Job title (See Instructions) Firefighter		
		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daigle, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1007 Oak Hollow Dr Leander, TX 78641		
Principal occupation / Job title (See Instructions) Firefighter		
		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daigle, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1007 Oak Hollow Dr Leander, TX 78641		
Principal occupation / Job title (See Instructions) Firefighter		
		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daigle, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1007 Oak Hollow Dr Leander, TX 78641		
Principal occupation / Job title (See Instructions) Firefighter		
		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/17 Rpt: 7/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/02/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Mark	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code 16920 Tidewater Cove Austin, TX 78717	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Mark	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code 16920 Tidewater Cove Austin, TX 78717	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Mark	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code 16920 Tidewater Cove Austin, TX 78717	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dicks, Honri	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2000 S Lakeline Blvd Cedar Park, TX 78619	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dicks, Honri	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2000 S Lakeline Blvd Cedar Park, TX 78619	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/17 Rpt: 8/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dicks, Honri	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 2000 S Lakeline Blvd Cedar Park, TX 78619	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gammon, Will	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2932 Angelina Dr Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gammon, Will	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2932 Angelina Dr Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gammon, Will	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2932 Angelina Dr Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Britney	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 5405 Barcelona Ct Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/17 Rpt: 9/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Britney	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 5405 Barcelona Ct Georgetown, TX 78628	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Britney	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 5405 Barcelona Ct Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Charles	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code 25200 Ranch Rd Leander, TX 78645	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Charles	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code 25200 Ranch Rd Leander, TX 78645	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Charles	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code 25200 Ranch Rd Leander, TX 78645	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/17 Rpt: 10/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/02/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Devin	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 9009 Great Hills Trail # 1515 Austin, TX 78759	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Devin	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 9009 Great Hills Trail # 1515 Austin, TX 78759	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Devin	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 9009 Great Hills Trail # 1515 Austin, TX 78759	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hancock, Sammy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 7933 Mountain View Rd Aubrey, TX 76227	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hancock, Sammy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 7933 Mountain View Rd Aubrey, TX 76227	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/17 Rpt: 11/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hancock, Sammy	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 7933 Mountain View Rd Aubrey, TX 76227		
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hert, John	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code 8001 RR 1869 Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hert, John	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code 8001 RR 1869 Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hert, John	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code 8001 RR 1869 Liberty Hill, TX 78642		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Troy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 12813 Wire Rd Leander, TX 78641		
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/17 Rpt: 12/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Troy 6 Contributor address; City; State; Zip Code 12813 Wire Rd Leander, TX 78641	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Troy Contributor address; City; State; Zip Code 12813 Wire Rd Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Michael Contributor address; City; State; Zip Code 1505 Jackie Robinson Pl Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Michael Contributor address; City; State; Zip Code 1505 Jackie Robinson Pl Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Michael Contributor address; City; State; Zip Code 1505 Jackie Robinson Pl Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/17 Rpt: 13/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/02/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Dylan	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 305 Finn St Hutto, TX 78634	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Dylan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 305 Finn St Hutto, TX 78634	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Dylan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 305 Finn St Hutto, TX 78634	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdonald, Chris	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1203 North Crest Granite Shoals, TX 78654	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdonald, Chris	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1203 North Crest Granite Shoals, TX 78654	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/17 Rpt: 14/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdonald, Chris	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 1203 North Crest Granite Shoals, TX 78654	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ming, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1745 CR 262 Geotgetown, TX 78633	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ming, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1745 CR 262 Geotgetown, TX 78633	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ming, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1745 CR 262 Geotgetown, TX 78633	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Donnie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 22109 Cross Timber Bend Lago Vista, TX 78645-4812	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/17 Rpt: 15/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Donnie	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 22109 Cross Timber Bend Lago Vista, TX 78645-4812	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Donnie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 22109 Cross Timber Bend Lago Vista, TX 78645-4812	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Asa	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code PO Box 541 Marble Falls, TX 78654	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Asa	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code PO Box 541 Marble Falls, TX 78654	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Asa	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code PO Box 541 Marble Falls, TX 78654	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/17 Rpt: 16/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/02/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pipkin, David	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 1018 Terrace Dr Leander, TX 78641	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pipkin, David	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1018 Terrace Dr Leander, TX 78641	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pipkin, David	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1018 Terrace Dr Leander, TX 78641	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ringstaff, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 851 CR 177 Leander, TX 78641	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ringstaff, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 851 CR 177 Leander, TX 78641	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/17 Rpt: 17/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ringstaff, James 6 Contributor address; City; State; Zip Code 851 CR 177 Leander, TX 78641	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robeson, Tim Contributor address; City; State; Zip Code 300 Terry Ln Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robeson, Tim Contributor address; City; State; Zip Code 300 Terry Ln Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robeson, Tim Contributor address; City; State; Zip Code 300 Terry Ln Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stengel, Brannon Contributor address; City; State; Zip Code 25 Waters Edge Cir Georgetown, TX 78626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/17 Rpt: 18/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stengel, Brannon	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 25 Waters Edge Cir Georgetown, TX 78626	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stengel, Brannon	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 25 Waters Edge Cir Georgetown, TX 78626	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sukup, Chris	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 20706 Park Dr Lago Vista, TX 78645	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sukup, Chris	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 20706 Park Dr Lago Vista, TX 78645	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sukup, Chris	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 20706 Park Dr Lago Vista, TX 78645	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/17 Rpt: 19/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/02/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Ty	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 1101 Brushy Creek Rd Cedar Park, TX 78613	
8 Principal occupation / Job title (See Instructions) Frefighter		9 Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Ty	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1101 Brushy Creek Rd Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Frefighter		Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Ty	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1101 Brushy Creek Rd Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Frefighter		Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troxtell, Kyle	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 13108 Country Trail Austin, TX 78732	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troxtell, Kyle	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 13108 Country Trail Austin, TX 78732	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/17 Rpt: 20/23
2 FILER NAME Friends of North Shore Fire Department		3 Filer ID
4 Date 11/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troxtell, Kyle	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 13108 Country Trail Austin, TX 78732	
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) TCESD 1
Date 11/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2737 Crimson Sky Ct Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2737 Crimson Sky Ct Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 2737 Crimson Sky Ct Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) TCESD 1

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 -	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 F1: Sch: 1/2 Rpt: 21/23	2 FILER NAME Friends of North Shore Fire Department	3 Filer ID
4 Date 11/02/2016	5 Payee name GCP Association Services	
6 Amount (\$) \$1,845.00	7 Payee address; City; State; Zip Code 200 W Main Pflugerville, TX 78691	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2016	Payee name Miller Signs	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 18400 FM 1431 Jonestown, TX 78645	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment for billboard
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2016	Payee name Norman, Donnie	
Amount (\$) \$2,082.41	Payee address; City; State; Zip Code 22109 Cross Timbers Bend Lago Vista, TX 78645	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Billboard Reservation Fee; Trifold Flyer for Townhall meetings
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 -	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 F1: Sch: 2/2 Rpt: 22/23	2 FILER NAME Friends of North Shore Fire Department	3 Filer ID
4 Date 11/29/2016	5 Payee name Vasara Photography	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3961 Outpost Trace Lago Vista, TX 78645	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website creation and hosting registration.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

**POLITICAL COMMITTEE
AFFIDAVIT OF DISSOLUTION**

FORM PAC-DR

23 of 23

The Instruction Guide explains how to complete this form. **Complete only if "Report Type" on page 1 is marked "Dissolution" **

1 COMMITTEE NAME

Friends of North Shore Fire Department

2 Filer ID

3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath