



**CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS** **FORM C/OH COVER SHEET PG 2**

**13 C/OH NAME** Flannigan, James (Mr.) **14 ACCOUNT #** (Ethics Commission filers) 00629478

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

.. This box is for notice of political expenditures 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. ..

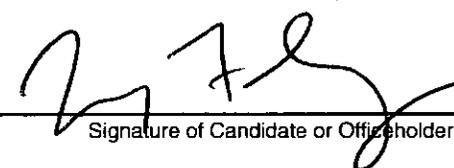
<input type="checkbox"/> <b>GENERAL</b>  <input type="checkbox"/> <b>SPECIFIC</b>	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>  <b>COMMITTEE ADDRESS</b>  <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>
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additional pages

<b>16 CONTRIBUTION TOTALS</b>	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)	\$	3,963.67
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	9,544.66
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	4,459.60
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	150.00

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James Flannigan, this the 27<sup>th</sup> day of Oct., 20 14, to certify which, witness my hand and seal of office.

Terri Saraceno **TERRI SARACENO**  
 Signature of officer administering oath Print name of officer administering oath









# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 4/8 Report: 6/19

**2** FILER NAME Flannigan, James (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00629478

**4** Date  
10/09/2014

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Friedman, Jeff

**6** Contributor address; City; State; Zip Code  
3500 Jefferson St  
Suite 110  
Austin, TX 78731

**7** Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

\$180.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)  
Owner

**10** Employer (See Instructions)  
Capra & Cavelli

Date  
10/22/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Friedman, Jeff

Contributor address; City; State; Zip Code  
3500 Jefferson St  
Suite 110  
Austin, TX 78731

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$170.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Capra & Cavelli

Date  
10/02/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Goble, Gary

Contributor address; City; State; Zip Code  
14001 Avery Ranch Blvd  
#2302  
Austin, TX 78717

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Energy Consultant

Employer (See Instructions)  
MAC, Inc.

Date  
09/27/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Ham, Kitty Woo

Contributor address; City; State; Zip Code  
9300 Cedar Crest  
Austin, TX 78750

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Nurse Practitioner

Employer (See Instructions)  
Dominion Family HC

Date  
10/15/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Harp, James

Contributor address; City; State; Zip Code  
6702 Langston Dr  
Austin, TX 78723

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Real Estate Agent

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 5/8 Report: 7/19

**2** FILER NAME Flannigan, James (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00629478

**4** Date  
10/24/2014

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Kendall, Sue Ann

**7** Amount of contribution (\$) | **8.** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
9001 Braesgate Cv  
Austin, TX 78717

\$233.34

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)  
Documentation Manager

**10** Employer (See Instructions)  
Planview

Date  
10/15/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Killebrew, Steve

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
9031 Lockleven Loop  
Austin, TX 78750

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
10/06/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Lee, Chi

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
11901 Hobby Horse Ct  
#1526  
Austin, TX 78758

\$175.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Network Tech

Employer (See Instructions)  
Time Warner Cable

Date  
10/10/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Levinski, Bobby

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
3979 River Place Bend  
Austin, TX 78730

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Law Clerk / Student

Employer (See Instructions)  
Lower Colorado River Authority

Date  
09/27/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Martinez, Wendy

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
4716 Oldfort Hill Dr  
Austin, TX 78723

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/8 Report: 8/19	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  10/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDonald, Mike  6 Contributor address; City; State; Zip Code 9800 Bordeaux Ln Austin, TX 78750	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date  10/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKenzie, JoAnn  Contributor address; City; State; Zip Code 6902 Edgefield Dr Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Financial Planning		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) JoAnn McKenzie LLC			
Date  09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, John  Contributor address; City; State; Zip Code 11504 Tanglebriar Trail Austin, TX 78750	Amount of contribution (\$)  \$16.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) US Army			
Date  10/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, John  Contributor address; City; State; Zip Code 11504 Tanglebriar Trail Austin, TX 78750	Amount of contribution (\$)  \$44.98	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) US Army			
Date  10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, John  Contributor address; City; State; Zip Code 11504 Tanglebriar Trail Austin, TX 78750	Amount of contribution (\$)  \$0.72	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) US Army			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 7/8 Report: 9/19

**2** FILER NAME Flannigan, James (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00629478

**4** Date  
10/25/2014

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Morgan, John

**7** Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
11504 Tanglebriar Trail  
Austin, TX 78750

\$3.40

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)  
Retired

**10** Employer (See Instructions)  
US Army

Date  
10/25/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Morgan, John

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
11504 Tanglebriar Trail  
Austin, TX 78750

\$1.39

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
US Army

Date  
10/25/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Morgan, John

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
11504 Tanglebriar Trail  
Austin, TX 78750

\$7.25

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
US Army

Date  
10/04/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Prendergast, Daria

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
11203 Thorny Brook Trail  
Austin, TX 78750

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Child Safety Program

Employer (See Instructions)  
City of Austin

Date  
10/15/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Putnam, Kevin

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
10500 Lockerbie  
Austin, TX 78750

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Firefighter

Employer (See Instructions)  
City of Austin

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 8/8 Report: 10/19

2 FILER NAME Flannigan, James (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00629478

4 Date 10/01/2014  
5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Shapiro, Teresa

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

10/01/2014  
6 Contributor address; City; State; Zip Code  
3416 Inwood Cove  
Round Rock, TX 78681

\$20.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 10/16/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Southwest Laborer's District Council PAC

Amount of contribution (\$) | In-kind contribution description (if applicable)

10/16/2014  
Contributor address; City; State; Zip Code  
11720 E 21st St  
Suite D  
Tulsa, OK 74129

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 09/27/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Witbrock, Michael

Amount of contribution (\$) | In-kind contribution description (if applicable)

09/27/2014  
Contributor address; City; State; Zip Code  
3911 Walnut Clay Dr  
Austin, TX 78731

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Scientists

Employer (See Instructions)  
Cycorp, Inc.

Date 10/25/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Zamora, James

Amount of contribution (\$) | In-kind contribution description (if applicable)

10/25/2014  
Contributor address; City; State; Zip Code  
13303 Lyndhurst St  
A  
Austin, TX 78729

\$95.00

food and beverages for house party

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/8 Report: 11/19		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00629478	
<b>4 Date</b> 10/07/2014		<b>5 Payee name</b> American Printing and Mailing			
<b>6 Amount (\$)</b> \$427.59		<b>7 Payee address City; State; Zip Code</b> 1606 Headway Circle Austin, TX 78754			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> sheets of printed corrugated plastic hammers to add to yard signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 09/30/2014		<b>Payee name</b> Christensen, Elizabeth			
<b>Amount (\$)</b> \$300.00		<b>Payee address City; State; Zip Code</b> PO Box 1792 Austin, TX 78767			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> paid canvassing Sept 16-30 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/01/2014		<b>Payee name</b> Christensen, Elizabeth			
<b>Amount (\$)</b> \$1,360.00		<b>Payee address City; State; Zip Code</b> PO Box 1792 Austin, TX 78767			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> October paid canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/10/2014		<b>Payee name</b> Cox Media Group			
<b>Amount (\$)</b> \$9.99		<b>Payee address City; State; Zip Code</b> 6205 Peachtree Dunwoody Rd Atlanta, GA 30328			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Fees		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> subscription to Austin American-Statesman <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 2/8 Report: 12/19	<b>2</b> FILER NAME Flannigan, James (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00629478
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<b>4</b> Date 10/13/2014	<b>5</b> Payee name Creation Station Printing and Design
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<b>6</b> Amount (\$) \$253.31	<b>7</b> Payee address City; State; Zip Code 2410 East Riverside Dr Suite C4 Austin, TX 78741
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GOTV stickers  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/26/2014	Payee name Facebook
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Amount (\$) \$500.06	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising for campaign facebook and Flannigan Can Fix It  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/01/2014	Payee name Facebook
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Amount (\$) \$43.56	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising for campaign facebook and Flannigan Can Fix It  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/06/2014	Payee name FedEx
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Amount (\$) \$5.60	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printed 30 day campaign finance report  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 3/8 Report: 13/19	<b>2</b> FILER NAME Flannigan, James (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00629478
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<b>4</b> Date 10/15/2014	<b>5</b> Payee name FedEx
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<b>6</b> Amount (\$) \$5.13	<b>7</b> Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> walk sheets
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/16/2014	Payee name Google, Inc.
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Amount (\$) \$50.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flannigan Can Fix It/other campaign advertising on google
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/21/2014	Payee name Google, Inc.
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Amount (\$) \$200.00	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flannigan Can Fix It/other campaign advertising on google
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/01/2014	Payee name Haule, Margaret
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Amount (\$) \$208.00	Payee address City; State; Zip Code PO Box 163014 Austin, TX 78716
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> paid canvassing Sept 16 - 30
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/8 Report: 14/19	<b>2 FILER NAME</b> Flannigan, James (Mr.)	<b>3 ACCOUNT #</b> (TEC filers) 00629478
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<b>4 Date</b> 10/20/2014	<b>5 Payee name</b> Haule, Margaret
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<b>6 Amount (\$)</b> \$520.00	<b>7 Payee address</b> City; State; Zip Code PO Box 163014 Austin, TX 78716
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> paid canvassing Oct 1 - Oct 15 <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 09/30/2014	<b>Payee name</b> Heinrich, Allison
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<b>Amount (\$)</b> \$2,500.00	<b>Payee address</b> City; State; Zip Code 9807 N FM 620 #21102 Austin, TX 78726
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> September Salary - campaign management <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 10/01/2014	<b>Payee name</b> Home Depot
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<b>Amount (\$)</b> \$5.81	<b>Payee address</b> City; State; Zip Code 11301 Lakeline Blvd Austin, TX 78717
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> cable ties to attach corrugated plastic hammer-shaped sign component to road signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 10/21/2014	<b>Payee name</b> NationBuilder
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<b>Amount (\$)</b> \$78.00	<b>Payee address</b> City; State; Zip Code 448 S Hill St #200 Los Angeles, CA 90013
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Website - October <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/8 Report: 15/19	<b>2</b> FILER NAME Flannigan, James (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00629478
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<b>4</b> Date 09/27/2014	<b>5</b> Payee name Office Depot
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<b>6</b> Amount (\$) \$62.76	<b>7</b> Payee address City; State; Zip Code 4501 West Braker Lane Austin, TX 78759
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printer ink, paper  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 10/15/2014	<b>Payee name</b> Rombado, Max
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<b>Amount (\$)</b> \$1,400.00	<b>Payee address</b> City; State; Zip Code 2624 Whitis Ave #6210 Austin, TX 78705
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Internship Stipend: Sept - Nov  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 10/18/2014	<b>Payee name</b> Starbucks
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<b>Amount (\$)</b> \$5.68	<b>Payee address</b> City; State; Zip Code 13450 Research Blvd Austin, TX 78750
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee/water for volunteers  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 09/30/2014	<b>Payee name</b> Strategic Payment Systems, Inc.
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<b>Amount (\$)</b> \$212.81	<b>Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> statement fees for credit card processing  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 6/8 Report: 16/19	<b>2</b> FILER NAME Flannigan, James (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00629478
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<b>4</b> Date 10/02/2014	<b>5</b> Payee name Strategic Payment Systems, Inc.
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<b>6</b> Amount (\$) \$21.20	<b>7</b> Payee address City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with online payment gateway  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/06/2014	Payee name Strategic Payment Systems, Inc.
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Amount (\$) \$5.40	Payee address City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with credit card swiper payment gateway  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/11/2014	Payee name Target
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Amount (\$) \$9.29	Payee address City; State; Zip Code 8601 Research Blvd Austin, TX 78758
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mounting tape to attach corrugated plastic hammer-shaped sign components to yard signs  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/12/2014	Payee name Target
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Amount (\$) \$25.25	Payee address City; State; Zip Code 11220 RR 2222 Austin, TX 78730
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> paper, mounting squares for yard sign hammer components  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 7/8 Report: 17/19	<b>2</b> FILER NAME Flannigan, James (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00629478
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<b>4</b> Date 10/20/2014	<b>5</b> Payee name Target
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<b>6</b> Amount (\$) \$15.10	<b>7</b> Payee address City; State; Zip Code 11220 RR 2222 Austin, TX 78730
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mounting squares to attach corrugated plastic hammer--shaped sign components to yard signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/20/2014	Payee name Target
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Amount (\$) \$6.04	Payee address City; State; Zip Code 11220 RR 2222 Austin, TX 78730
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mounting squares to attach corrugated plastic hammer--shaped sign components to yard signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/30/2014	Payee name Tuggey Calvoz, LLP
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Amount (\$) \$960.00	Payee address City; State; Zip Code 900 Congress Ave Suite 210 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Legal Services	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign finance and other compliance, reviewing finance reports <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/20/2014	Payee name Twitter
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Amount (\$) \$108.82	Payee address City; State; Zip Code 1355 Market St Suite 900 San Francisco, CA 94103
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flannigan Can Fix It/other campaign advertising on Twitter <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 8/8 Report: 18/19	<b>2</b> FILER NAME Flannigan, James (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00629478
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<b>4</b> Date 10/10/2014	<b>5</b> Payee name Williamson County Election's Department
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<b>6</b> Amount (\$) \$112.41	<b>7</b> Payee address City; State; Zip Code 301 SE Inner Loop Suite 104 Georgetown, TX 78626
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> ballot by mail returns data  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/10/2014	Payee name Williamson County Election's Department
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Amount (\$) \$122.63	Payee address City; State; Zip Code 301 SE Inner Loop Suite 104 Georgetown, TX 78626
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> early voting in person data  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/10/2014	Payee name Williamson County Election's Department
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Amount (\$) \$10.22	Payee address City; State; Zip Code 301 SE Inner Loop Suite 104 Georgetown, TX 78626
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> updated voter file  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Information entered by filer as a memo

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Schedule A

As per requirements concerning out-of-state PAC donations-- name: Southwest Laborer's District Council (SWLDC) PAC | address: 11720 East 21st St, Tulsa, OK 74129 | ph:918-585-1799 | The SWDLC Executive Board appointed Treasurer Jeremy Hendricks, 5555 N Lamar Ste E-121, Austin, TX 78751; 405-833-6462