# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

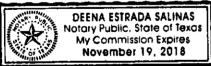
# FORM C/OH COVER SHEET PG 1

_				T .		
The C/OH Instruction Guit	E explains how to complete this	s form. 1 A	.CCOUNT # Ethics Commission filers)	2 PAGE#		
			0629478	1 of 78	A 201	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRS Mr. Jame	эт .	MI	OFFICE U	SEONLY &	
	NICKNAME LAS Jimmy Flant		SUFFIX		CITY 8	
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT / SUITE :	#; CITY;	STATE; ZIP CODE		CLERK	
ADDRESS  Change of Address	#1023 Austin, TX 78729			Date Hand-delivered	or D <b>ate</b> ostmarked	
				Receipt #	Amount	
5 CAMPAIGN TREASURER	MS/MRS/MR FIRS	ST	Mi	Date Processed		
NAME	Mrs. Lisa			Date Imaged		
	NICKNAME LAS Gayr		SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEAS)  10901 Leafwood Ln Austin, TX 78750	E); APT / SUITE #.	CITY; STATE;	ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM (512) 658-0636	BER	EXTENSION			
8 REPORT TYPE	January 15 30th	day before election	Runoff	15th day after of appointment (of	ampaign treasurer ficeholder only)	
	July 15 X 8th c	day before election	Exceeded \$500 limit	Final report (Att	ach C/OH - FR)	
9 PERIOD COVERED	Month Day Year		Month Day	Year		
	10/26/2014	THROUGH	12/06/20	14		
10 ELECTION	ELECTION DATE  Month Day Year	ELECTION TYPE Primary	X Runoff	General	Special	
	12/16/2014			Certeral	Орска	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)			
			Austin City Council I	District 6		
GO TO PAGE 2						

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

13 C/OH NAME Flann	igan, James (Mr.)		14 ACCOUNT # 00629478	(Ethics Commission filers)		
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the cal out the candidate's or officeholder's knowledge or consent. Candidately receive notice of such expenditures	ndidate / officeholder es and officeholders	These expenditures may are required to report this		
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Austin Board of Realtors PAC				
	GENERAL	COMMITTEE ADDRESS 10900 Stonelake Blvd A-100 Austin, TX 78759				
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Chenevert, Emily				
additional pages		COMMUTEE CAMPAIGN TREASURER ADDRESS 10900 Stonelake Blvd A-100 Austin, TX 78759				
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	41,059.19		
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	0.00		
	4. TOTAL	POLITICAL EXPENDITURES	\$	21,021.48		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LY OF THE REPORTING PERIOD	\$	13,801.53		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00		
17 AFFIDAVIT		I swear, or affirm, under penalty	of perjury, that the	accompanying report		



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 Office holder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and	subscrib	ed before	me by	the said
V	1	τλ.	•	

James Flannigan

\_, this the

\_\_ day

, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

# **CANDIDATE / OFFICEHOLDER REPORT:**

### FORM C/OH **ADDENDUM**

NOTICE FROM	POLITCAL CO	MMIIIEE(S)		Page 3 of 78
C/OH NAME Flanniga	an, James (Mr.)			ACCOUNT # (Ethics Commission filers) 00629478
17 NOTICE FROM POLITICAL	have been made with		res by political committees to support the candid iceholder's knowledge or consent. Candidates a expenditures. ••	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Austinites for Equity	
	X GENERAL	COMMITTEE ADDRESS	1812 Centre Creek Dr Suite 310 Austin, TX 78754	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	10.0	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	1812 Center Creek Dr Suite 310 Austin, TX 78754	
NOTICE FROM POLITICAL	have been made with		res by political committees to support the candid iceholder's knowledge or consent. Candidates a expenditures. ••	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Austinites for Equity	
	X GENERAL	COMMITTEE ADDRESS	1812 Centre Creek Dr Suite 310 Austin, TX 78754	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Kirfman, Jack	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	1812 Centre Creek Dr Austin, TX 78754	
NOTICE FROM POLITICAL	have been made with		res by political committees to support the candid iceholder's knowledge or consent. Candidates a expenditures. ••	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Sierra Club Political Committee of T	exas
	X GENERAL	COMMITTEE ADDRESS	615 Willow San Antonio, TX 78202	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Gonzalez, Hector	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	615 Willow San Antonio, TX 78202	
NOTICE FROM POLITICAL	have been made with		res by political committees to support the candid ceholder's knowledge or consent. Candidates a expenditures. ••	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Travis County Democratic Party	
	X GENERAL	COMMITTEE ADDRESS	PO Box 684263 Austin, TX 78768	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Soifer, Jan	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	PO Box 684263 Austin, TX 78768	· · · · · · · · · · · · · · · · · · ·

	The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 1/9	51 Report: 4/78
2	FILER NAME	Flannigan, James (Mr.)	· ·		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor Abraham, Joju	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/22/2014	6 Contributor address; 7011 Creighton Ln Austin, TX 78723	City; State; Zip Code		\$350.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Engineer	ation / Job title (See Instruction	es)	10 Employer (See In Water Equipme	structions) ent Technologies	
	Date	Full name of contributor AFSCME PEOPLE PAC	out-of-state PAC (ID#	± C00011114 )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/22/2014	Contributor address; 1625 L St NW Washington, DC 20036	City; State; Zip Code		\$350.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instruction	is)	Employer (See In	structions)	
	Date	Full name of contributor Albert, David	out-of-state PAC (ID#	<b>*</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/28/2014	1101 Grove Blvd	City; State; Zip Code		\$350.00	 
		#703 Austin, TX 78741			(If travel outside of	Texas, complete Schedule T)
	Principal occup Professor	eation / Job title (See Instruction	is)	Employer (See In Austin Commur		
	Date	Full name of contributor Alexander, Clifton	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; 3201 Esperanza Crossing #354 Austin, TX 78758	City; State; Zip Code		\$200.00	! 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Firefighter	ation / Job title (See Instruction	s)	Employer (See In City of Austin -	structions) Fire Department	
	Date	Full name of contributor Allen, Richard	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; 7916 Agape Ln Waxhaw, NC 28173	City; State; Zip Code		\$50.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Salesman	ation / Job title (See Instruction	s)	Employer (See In Retired	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 2/5	51 Report: 5/78					
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	(Ethics Commission filers)					
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≴ Anderson, Greg	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)					
	10/29/2014	6 Contributor address; City; State; Zip Code 301 E 6th St 320		\$50.00	 					
		Austin, TX 78702		(If travel outside of	Texas, complete Schedule T)					
9	Principal occup Policy Adviso	ation / Job title (See Instructions)	10 Employer (See In City of Austin	structions)						
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	12/04/2014	Contributor address; City; State; Zip Code 2807 Regents Park Austin, TX 78746		\$25.00	 					
Additi, 17.70140				(If travel outside of	Texas, complete Schedule T)					
	Principal occup Psychologist	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)						
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	12/04/2014	Contributor address; City; State; Zip Code 2807 Regents Park Austin, TX 78746		\$25.00	   					
		Addity TX 19740		(If travel outside of	Texas, complete Schedule T)					
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Armbrust & Bro							
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)					
	11/26/2014	Contributor address; City; State; Zip Code 4107 Medical Parkway #100 Austin, TX 78756		\$350.00	 					
				(If travel outside of	Texas, complete Schedule T)					
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)						
	Date	Full name of contributor ☐ out-of-state PAC (ID# Austin Board of Realtors PAC	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	12/04/2014	Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	 					
				(if travel outside of	Texas, complete Schedule T)					
	Principal occup	ation / Job title (See Instructions)	Employer (See In	·	,					

P.O.Box 12070

L					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
<u> </u>			·	Schedule: 3/9	51 Report: 6/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor □ out-of-state PAC (ID#	į )	7 Amount of	8 In-kind contribution
	Dotto	Austin Police Association PAC		contribution (\$)	description (if applicable)
	11/26/2014	6 Contributor address; City; State; Zip Code 5817 Wilcab Rd Suite 4		\$350.00	    -
		Austin, TX 78721		(If travel outside of	Texas, complete Schedule T)
9	Principal occur	Dation / Job title (See Instructions)	10 Employer (See In	<u> </u>	
Ľ	r meipar occu,	sation 7 year title (occ manucions)	10 Employer (occur		
	Date	Full name of contributor  ut-of-state PAC (ID#	<b>#</b> )	Amount of	In-kind contribution
		Austin Travis County EMS Employees Associatio		contribution (\$)	description (if applicable)
	11/01/2014	Contributor address; City; State; Zip Code 5817 Wilcab Rd		\$350.00	I I
		Ste 3 Austin, TX 78721			l
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			Employer (See In	structions)	
			i		
F	Date	Full name of contributor	)	Amount of	In-kind contribution
	Babalola, Niran			contribution (\$)	description (if applicable)
	11/11/2014	Contributor address; City; State; Zip Code		\$50.00	  -
		201 Lavaca St Apt 320			 
		Austin, TX 78701			·
L			F (0)	1 -	Texas, complete Schedule T)
	Software Eng	pation / Job title (See Instructions) pineer	Employer (See In TabbedOut	structions)	
F	Date	Full name of contributor  ut-of-state PAC (ID#	<b>!</b> )	Amount of	In-kind contribution
		Bailey, Rich		contribution (\$)	description (if applicable)
l					l
	11/12/2014	Contributor address; City; State; Zip Code		\$100.00	
		P.O. Box 2062 Austin, TX 78768			I
				(if travel outside of	Texas, complete Schedule T)
⊢	Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	
	Government		City of Austin	,	
	Date	Full name of contributor  ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
		Bartram, Ashley		contribution (\$)	description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	6350.00	
	12/04/2014	309 McConnell Dr		\$350.00	i
		Austin, TX 78746			1
				(If travel outside of	Texas, complete Schedule T)
├	Principal occur	vation / Job title (See Instructions)	Employer (See In	<u> </u>	
	Attorney	Section 228 and 1000 management	State of Texas		

	The Instruction	N GUIDE explains how to complete this form.	<u>-</u>	1 PAGE # Schedule: 4/5	51 Report: 7/78					
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)					
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Bartram, John	<b>‡</b> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)					
	12/04/2014	6 Contributor address; City; State; Zip Code 309 McConnell Dr Austin, TX 78746		\$350.00	 					
				(If travel outside of	Texas, complete Schedule T)					
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Armbrust & Bro	structions) wn, PLLC						
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	11/17/2014	Contributor address; City; State; Zip Code 580 La Ventana Pkwy Driftwood, TX 78619		\$150.00	[ ] [					
				(If travel outside of	Texas, complete Schedule T)					
Principal occupation / Job title (See Instructions) Real Estate Broker			Employer (See In River & Oaks R							
	Date	Full name of contributor	<b>!</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	12/05/2014	Contributor address; City; State; Zip Code 2503 Flora Cv Austin, TX 78746		\$100.00	 					
					· · · · · · · · · · · · · · · · · · ·					
lacksquare	Dringing occur	ation / Job title (See Instructions)	Employer (See In	<u></u>	Texas, complete Schedule T)					
	Telecom	audity 300 title (See Mattactions)	TDI	au deuoria)						
	Date	Full name of contributor	<b>!</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	12/02/2014	Contributor address; City; State; Zip Code 816 Congress Ave Ste 1600 Austin, TX 78701		\$350.00	 					
				(If travel outside of	Texas, complete Schedule T)					
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)						
	Date	Full name of contributor	<b>*</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)					
	12/04/2014	Contributor address; City; State; Zip Code 11205 Limoncillo Ct Austin, TX 78750		\$350.00	 					
				(If travel outside of	Texas, complete Schedule T)					
	Principal occup Rancher	ation / Job title (See Instructions)	Employer (See In Beckham Ranci							

P.O.Box 12070

		<del></del>				
	The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 5/9	51 Report: 8/78
2	FILER NAME	Flannigan, James (Mr.)	_		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor Beckham, Kim	out-of-state PAC (ID#	*	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/04/2014	6 Contributor address; 11205 Limoncillo Ct Austin, TX 78750	City; State; Zip Code		\$350.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instruction	ns)	10 Employer (See In Armbrust & Bro		
	Date	Full name of contributor Bell, Doug	out-of-state PAC (ID#	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; 9202 Cedar Crest Dr Austin, TX 78750	City; State; Zip Code		\$100.00	 
						, 
<u> </u>					,	Texas, complete Schedule T)
	Engineer	eation / Job title (See Instruction	······································	Employer (See In Retired	structions)	
	Date	Full name of contributor Bell, Doug	out-of-state PAC (ID#	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; 9202 Cedar Crest Dr Austin, TX 78750	City; State; Zip Code		\$100.00	[ ] [
					(if travel outside of	Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instruction	ns)	Employer (See In Retired	structions)	
	Date	Full name of contributor Bentley, Jeremiah	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/22/2014	Contributor address; 11206 Morning Glory Trail Austin, TX 78750	City; State; Zip Code		\$50.00	! 
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instruction mmunications	is)	Employer (See In Texas Mutual	structions)	
	Date	Full name of contributor Benz, Erick	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	11116 Miramar Dr	City; State; Zip Code		\$350.00	! !
		Austin, TX 78726				l _
		·				Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instruction	is)	Employer (See În 3M	structions)	

					<u> </u>
	The Instruction	ON GUIDE explains how to complete this form.	_	1 PAGE# Schedule: 6/9	51 Report: 9/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Beutelman, Henry	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/19/2014	6 Contributor address; City; State; Zip Code 12909 Covington Trl Austin, TX 78727		\$25.00	   
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 9803 Mandeville Circle Austin, TX 78750		\$75.00	   
		all and the title (One Instantion)	Sample of Control	l '	Texas, complete Schedule T)
	Principal occup Landscape D	etion / Job title (See Instructions) esign	Employer (See In Windy Point Ga		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 9803 Mandeville Circle Austin, TX 78750		\$75.00	 
				'	Texas, complete Schedule T)
	Principal occup Landscape D	ation / Job title (See Instructions) esign	Employer (See In Windy Point Ga		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 9206 Brigadoon Cv Austin, TX 78750		\$60.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup CPA	ation / Job title (See Instructions)	Employer (See In N/A	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 5800 Techni Center Dr Austin, TX 78721	, , , , , , , , , , , , , , , , , , , ,	\$20.00	[   
				(If travel outside of	Texas, complete Schedule T)
	Principal occurs	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	
	Canvasser	and the food mentantly		Coordinated Camp	aign

	The Instruction	on Guide explains how to comp	plete this form.		1 PAGE# Schedule: 7/	51 Report: 10/78			
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)			
4	Date	5 Full name of contributor Boyce, Mary Elizabeth	ut-of-state PAC (ID#	<u>*</u> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	11/05/2014	6 Contributor address; 10807 Keystone Blvd Austin, TX 78750	City; State; Zip Code		\$350.00	   			
					(If travel outside of	Texas, complete Schedule T}			
9	Principal occup Attorney	ation / Job title (See Instructions	s)	10 Employer (See In Texas Legal Se					
	Date	Full name of contributor Brand, Patricia	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/14/2014	Contributor address; 10013 Morgan Creek Dr Austin, TX 78717	City; State; Zip Code		\$25.00	[ ]			
					<u> </u>	Texas, complete Schedule T)			
	Principal occup Accountant	ation / Job title (See Instructions	s) 	Employer (See In Retired	estructions)				
	Date	Full name of contributor Bray, Timothy	☐ out-of-state PAC (ID#	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/25/2014	Contributor address; 2200 S Pleasant Valley Rd #107 Austin, TX 78741	City; State; Zip Code		\$50.00	 			
L						Texas, complete Schedule T}			
	Principal occup Cashier	ation / Job title (See Instructions	s)	Employer (See In Chipotle	structions)				
	Date	Full name of contributor Brenner, Elizabeth	☐ out-of-state PAC (ID#	<b>!</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/17/2014	Contributor address; 3207 Larry Ln Unit A Austin, TX 78722	City; State; Zip Code	· • · · · • · · · · · · · · · · · · · ·	\$35.00	! ! !			
					(If travel outside of	f Texas, complete Schedule T)			
	Principal occup Attorney	ation / Job title (See Instructions	3)	Employer (See In BAJB	structions)				
	Date	Full name of contributor Bryant, Suzanne	Out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/13/2014	Contributor address; 1500 W 24th St Austin, TX 78703	City; State; Zip Code		\$350.00	! !			
					(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions	s)	Employer (See In	l -	. ,			
	Attorney	•		Law Office of S					

					-
•	CH	n.	Ш		
31		LΝ	JL	_	_

	The Instruction	Guide explains how to complete this form.	-	1 PAGE # Schedule: 8/5	51 Report: 11/78	
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)	
4	Date	5 Full name of contributor  ut-of-state PAC (ID)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/19/2014	6 Contributor address; City; State; Zip Code 11008 Shallow Water Rd Austin, TX 78717		\$350.00	 	
Ļ	Dringinal ecoup	pation / Job title (See Instructions)	10 Employer (See In	Ļ <u>`</u>	Toxas, complete contacts 1,	
9	Founder/Dire			School Academic	& Athletic League	
	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable) food and beverages for fundraiser	
	11/19/2014	Contributor address; City; State; Zip Code 11008 Shallow Water Rd Austin, TX 78717		\$297.05	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Teacher	ation / Job title (See Instructions)	Employer (See In Taylor ISD	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/09/2014	Contributor address; City; State; Zip Code 7202 Foxtree Cv Austin, TX 78750		\$20.00	 	
				/If travel outside of	Texas, complete Schedule T)	
	Principal occur	pation / Job title (See Instructions)	Employer (See In	· `	Taxaa, complete contracto ()	
	Retired		N/A			
	Date	Full name of contributor	±)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/04/2014	Contributor address; City; State; Zip Code 2103 Schulie Ave Austin, TX 78703		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Farmer	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)		
	Date	Full name of contributor	<b>'</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/04/2014	Contributor address; City; State; Zip Code 2103 Schulie Ave Austin, TX 78703		\$350.00	 	
				(If two col and side = *	Taras samulata Sahadula D	
	Dringinal eagus	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)	
	Attorney	เลเกรา รอก แนะ (จะะ แายแกกการ)	Armbrust & Bro			

	The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 9/	51 Report: 12/78
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor Canon, Todd	out-of-state PAC (ID#	<b>#</b> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/10/2014	6 Contributor address; 804 Pressler St Austin, TX 78703	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Family Physic	pation / Job title (See Instruction cian	ns)	10 Employer (See In South Austin M		
	Date	Full name of contributor Carlson, Michelle	out-of-state PAC (ID#	<u>*</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; 1609 Mohle Dr Austin, TX 78703	City; State; Zip Code		\$350.00	} 
						Texas, complete Schedule T)
	Principal occup Attorney	eation / Job title (See Instruction	ns)	Employer (See In Reed & Scardin		
	Date	Full name of contributor Carlson, Patrick	out-of-state PAC (ID#	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; 1609 Mohle Dr Austin, TX 78703	City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	]   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instruction	ns)	Employer (See In Armbrust & Bro		
	Date	Full name of contributor Carter, Karen	out-of-state PAC (ID#	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; 1211 Wigwam Leander, TX 78641	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup University Pro	ation / Job title (See Instruction ofessor	ns)	Employer (See In Retired	structions)	
$\vdash$	Date	Full pamp of contain to	ut-of-state PAC (ID#		Amount of	In-kind contribution
	Date	Cesaro, Peter	Out-of-state PAC (ID#	<del>,</del>	contribution (\$)	description (if applicable)
	11/22/2014	54 Rainey St #713	City; State; Zip Code		\$25.00	   
		Austin, TX 78701				
					<u> </u>	Texas, complete Schedule T)
		ation / Job title (See Instruction	ns)	Employer (See In		
	Attorney			Graves Doughe	erty Hearon & Mod	iuy

	The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 10	//51 Report: 13/78
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor Chafetz, Norm	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; 11000 Rustic Manor Ln Austin, TX 78750	City; State; Zip Code		\$100.00	   
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Scorer	ation / Job title (See Instruction	s)	10 Employer (See In Pearson	structions)	
	Date	Full name of contributor Chafetz, Norm	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; 11000 Rustic Manor Ln Austin, TX 78750	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	<u> </u>	
	Scorer	•	,	Pearson		
	Date	Full name of contributor Chernin, Louise	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; 2703 NE 68 St Seattle, WA 98115	City; State; Zip Code		\$100.00	   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup CEO	ation / Job title (See Instruction	s)	Employer (See In Greater Seattle	structions) Business Associa	ition
	Date	Full name of contributor Chowdhury, Ahsan	out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; 6704 Havenbrook Cv Austin, TX 78759	City; State; Zip Code		\$100.00	 
					(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	structions)	
-	Date	Full name of contributor Coleman, Eugene	out-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	9550 Savannah Ridge Dr Unit 19	City; State; Zip Code		\$100.00	   
		Austin, TX 78726			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction:	s) I	Employer (See In:	•	-> -> ->
	N/A	•		Retired	,	

Texas Ethics Commission

	The Instruction	on Guide explains how to com	plete this form.		1 PAGE# Schedule: 11	/51 Report: 14/78
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT # 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor Connors, John	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; 11104 Amesite Trk Austin, TX 78726	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	· <del></del>
	Date	Full name of contributor Cook, Arny	☐ out-of-state PAC (ID#	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; 1514 Corona Dr Austin, TX 78723	City; State; Zip Code		\$35.00	1   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup CPA	ation / Job title (See Instruction	ns)	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor Cook, Terry	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; 3116 Goldenoak Circle Round Rock, TX 78681	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Property Stag	ation / Job title (See Instruction per	ns)	Employer (See In Staging Designs		
	Date	Full name of contributor Cook, Terry	☐ out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; 3116 Goldenoak Circle Round Rock, TX 78681	City; State; Zip Code		\$100.00	}   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Property Stag	ation / Job title (See Instruction er	is)	Employer (See In Staging Designs		
	Date	Full name of contributor Cooper, Gary	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; 4907 Bull Mountain Cv Austin, TX 78746	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instruction	is)	Employer (See In	structions)	
	N/A			Retired		

L							
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	/51 Report: 15/78		
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Cousar, James	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/26/2014	6 Contributor address; City; State; Zip Code 1110 W 7th St Austin, TX 78703		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Thompson & Kr				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/22/2014	Contributor address; City; State; Zip Code 11310 Spicewood Club Dr #2		\$30.00	 		
		Austin, TX 78750		(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See In	structions)			
	N/A		Retired				
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/19/2014	Contributor address; City; State; Zip Code 9619 Braeborn Glen Austin, TX 78729		\$50.00	    -		
		, radan, 17, 75, 25		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
$\vdash$	Date	Full name of contributor	<b>#</b> )	Amount of	In-kind contribution		
		DasGupta, Sumit		contribution (\$)	description (if applicable)		
	11/19/2014	Contributor address; City; State; Zip Code 8900 Bluegrass Dr Austin, TX 78759		\$150.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Retired SVP,	ation / Job title (See Instructions) Engineering	Employer (See In Silicon Integrati	structions) on Initiative, Inc			
	Date	Full name of contributor	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/05/2014	Contributor address; City; State; Zip Code 12125 Black Angus Dr Austin, TX 78727		\$25.00	   		
					·		
_	Data ata at	Aller A hele Miller (One Headers of Const.)	Emple 11/01	· ·	Texas, complete Schedule T)		
	Membership	ation / Job title (See Instructions) Manager	Employer (See In TMEA	structions)			

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 13	/51 Report: 16/78		
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)		
4	Date	5 Full name of contributor  ut-of-state PAC (ID# Davis, Larry	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/06/2014	6 Contributor address; City; State; Zip Code 7104 Seneca Cir Austin, TX 78736		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Owner	ation / Job title (See Instructions)	10 Employer (See In Oilcan Harry's	structions)			
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/16/2014	Contributor address; City; State; Zip Code 9204 Clearock Dr Austin, TX 78750		\$100.00	 		
					Texas, complete Schedule T)		
	Principal occup Lawyer	eation / Job title (See Instructions)	Employer (See In Self-Employed	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/18/2014	Contributor address; City; State; Zip Code 530 W Cornelia		\$100.00	 		
		#1S Chicago, IL 60657		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Communicati	ation / Job title (See Instructions) ons	Employer (See In AMA	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/22/2014	Contributor address; City; State; Zip Code 6112 Highlandale Austin, TX 78731		\$350.00	   		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Executive As	ation / Job title (See Instructions) sistant	Employer (See In Travis County	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/10/2014	Contributor address; City; State; Zip Code 934 E 50th St Austin, TX 78751		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Dentist	eation / Job title (See Instructions)	Employer (See In Self-Employed				

Е	The hieronesis	Curr avaloing how to complete this form			1 PAGE#	
L	THE INSTRUCTION	on Guide explains how to complete this form.				1/51 Report: 17/78
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT#	(Ethics Commission filers)
					00629478	
4	Date	5 Full name of contributor ☐ out-of-state Particle Parti	AC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; City; State; Zip 10300 Trogon Ct Austin, TX 78750	Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Investment C	ation / Job title (See Instructions) onsultant		10 Employer (See In: ProFutures Inc	structions)	
Г	Date	Full name of contributor	AC (ID#	<u> </u>	Amount of	In-kind contribution
		Denzer, Randy			contribution (\$)	description (if applicable)
	11/30/2014	Contributor address; City; State; Zip 4500 Steiner Ranch Blvd	Code		\$100.00	 
		Apt 2402 Austin, TX 78732				l
	_ ::=					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)	
	Date	Full name of contributor	AC (ID#	!	Amount of	In-kind contribution
		DePalma, Richard			contribution (\$)	description (if applicable)
Í	11/22/2014	Contributor address; City; State; Zip 7821 Wisteria Valley Dr Austin, TX 78739	Code		\$50.00	[   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)		Employer (See In		
	Consultant			Strategic Partne	erships	
	Date	Full name of contributor	AC (ID#	!)	Amount of	In-kind contribution
		Deshotel, Joe			contribution (\$)	description (if applicable)
	12/06/2014	Contributor address; City; State; Zip 1206 A Maple Austin, TX 78745	Code		\$50.00	 
					(If travel outside of	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instructions)	ī	Employer (See In:	structions)	reads, complete constant i,
	Communicati			<u> </u>	emocratic Party	
	Date	Full name of contributor	AC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution   description (if applicable)
	11/25/2014	Contributor address; City; State; Zip 12009 Tanglebriar Trl Austin, TX 78750	Code		\$50.00	 
		radan, rx rordo				_
	Dalmain et e e	ation / Joh Hills (One Joseph William)	-	Freela /D		Texas, complete Schedule T)
	N/A	ation / Job title (See Instructions)		Employer (See In: Retired	SITUCTIONS)	

	The Instruction	GUIDE explains how to complete this form.		1 PAGE# Schedule: 15	/51 Report: 18/78		
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)		
4	Date	5 Full name of contributor  ut-of-state PAC (ID Dochen, Sandy	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/23/2014	6 Contributor address; City; State; Zip Code 5010 N Rim Dr Austin, TX 78731		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Corporate Cit	ation / Job title (See Instructions) izenship	10 Employer (See In IBM	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/25/2014	Contributor address; City; State; Zip Code 8909 Spring Lake Dr Austin, TX 78750		\$50.00	   		
				(If travel outside of	Texas, complete Schedule T)		
⊢	Principal occup	ation / Job title (See Instructions)	Employer (See In	,			
	Online Sales	,	Self-Employed	_			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/04/2014	Contributor address; City; State; Zip Code 508 Genard St Austin, TX 78751		\$100.00	   		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Executive Dir	ation / Job title (See Instructions) ector	1 ' ' '	Employer (See Instructions) Austin Cooperative Business Association			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/16/2014	Contributor address; City; State; Zip Code 1211 Creekview Dr Round Rock, TX 78681		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/13/2014	Contributor address; City; State; Zip Code 5205 Maverick Dr Austin, TX 78727		\$100.00	] [ <del>]</del>		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) work Therapist	Employer (See In AustinWatsu	1 '	. ,		

L						
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 16	6/51 Report: 19/78	
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≠ Duncan, John	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/02/2014	6 Contributor address; City; State; Zip Code 816 Congress Ave Ste 1600 Austin, TX 78701		\$350.00	 	
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In None	l. :	<u></u>	
	Date	Full name of contributor	ļ)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/20/2014	Contributor address; City; State; Zip Code 11117 Avery Station Loop Austin, TX 78717		\$50.00	 	
ļ				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Deats Durst Ow			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/05/2014	Contributor address; City; State; Zip Code 2223 Waterloo City Ln Apt 374 Austin, TX 78741		\$50.00	 	
ĺ				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Editor in Chie	ation / Job title (See Instructions) f	Employer (See In SpareFoot	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/05/2014	Contributor address; City; State; Zip Code 4408 Long Champ #10 Austin, TX 78746		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Endeavor Real			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/22/2014	Contributor address; City; State; Zip Code 8901 Fairway Hill Dr Austin, TX 78750		\$50.00	! 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		

	The Instruction	N GUIDE explains how to com	plete this form.		1 PAGE # Schedule: 17	/51 Report: 20/78		
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT # 00629478	(Ethics Commission filers)		
4	Date	<b>5</b> Full name of contributor English, Linda	ut-of-state PAC (ID#	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/09/2014	6 Contributor address; 9912 Cinnabar Trail Austin, TX 78726	City; State; Zip Code		\$50.00	 		
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Homemaker	ation / Job title (See Instruction	s)	10 Employer (See In N/A	structions)			
	Date	Full name of contributor Erwin, Mark	☐ out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/25/2014	Contributor address; 2013b Simond Ave Austin, TX 78723	City; State; Zip Code		\$200.00	   		
					(If travel outside of	Texas, complete Schedule T)		
_	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	L ·			
	Technology N		,	Travis County				
	Date	Full name of contributor Fajkowski, Pete	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/22/2014	Contributor address; 2500 Bettis Blvd Austin, TX 78746	City; State; Zip Code		\$350.00	I   		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Chief Executi	ation / Job title (See Instruction ve Officer	s)	Employer (See In HorneStart	structions)			
	Date	Full name of contributor Feltman, David	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/18/2014	Contributor address; 1076 E Deepwell Rd Palm Springs, CA 92264	City; State; Zip Code		\$150.00	!   		
				i	(If travel outside of	Texas, complete Schedule T)		
	Principal occup Consultant	ation / Job title (See Instruction	s)	Employer (See In Self-Employed	structions)			
	Date	Full name of contributor Finzel, Benjamin	☐ out-of-state PAC (ID#	<u>!</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/18/2014	Contributor address; 2310 Ashmead Place NW #106	City; State; Zip Code		\$50.00	 		
		Washington, DC 20009				. ,		
	<u> </u>		<u> </u>	E		Texas, complete Schedule T)		
	Principal occup Public Relation	ation / Job title (See Instruction ns	s)	Employer (See In Geln Echo Grou				

	The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 18	:/51 Report: 21/78	
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)	
4	Date	5 Full name of contributor Flahive, Kevin	☐ out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/04/2014	6 Contributor address; 5010 Finley Dr Austin, TX 78731	City; State; Zip Code		\$25.00	  -  -	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Attorney	ation / Job title (See Instruction	s)	10 Employer (See In Armbrust & Bro			
	Date	Full name of contributor Flannigan, Kenneth	out-of-state PAC (ID	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/27/2014	Contributor address; 12600 Vandella St Frisco, TX 75035	City; State; Zip Code		\$350.00	! ! 	
						Texas, complete Schedule T)	
	Principal occup Consultant	pation / Job title (See Instructions	s)	Employer (See In Rand Worldwid			
	Consultant			Rand Worldwide	<b>-</b>		
	Date	Full name of contributor Flannigan, Sheila	☐ out-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/25/2014	Contributor address; 2022 Ambassador Ave Woodland, WA 98674	City; State; Zip Code		\$35.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Program Ass	pation / Job title (See Instructions istant	s)	Employer (See In M.J. Murdock C			
	Date	Full name of contributor Flannigan, Susan	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/27/2014	Contributor address; 3108 Pine Needle Dr McKinney, TX 75070	City; State; Zip Code		\$350.00	 	
1					(if travel outside of	Texas, complete Schedule T)	
	Principal occup Retired	ation / Job title (See Instruction	5)	Employer (See In Retired	structions)		
	Date	Full name of contributor Florence, Rodney	☐ out-of-state PAC (ID#	<u>+</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/03/2014	Contributor address; 303 Lightsey Rd Austin, TX 78704	City; State; Zip Code		\$20.00	   	
					(If travel outside of	Texas, complete Schedule T)	
$\vdash$	Principal occur	ation / Job title (See Instructions	2)	Employer (See In	_`	rexes, complete solledule 1)	
	Artist	auon i Job une (See instructions	<b>3</b> )	Retired/Texas F	,		

	OTTL	OTTER THART ELDOES OR ESANS							
	The Instruction	את Guide explains how to com	plete this form.		1 PAGE# Schedule: 19	/51 Report: 22/78			
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)			
4	Date	5 Full name of contributor Ford, Charlie	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	ln-kind contribution description (if applicable)			
	11/06/2014	6 Contributor address; 12103 Conrad Austin, TX 78717	City; State; Zip Code	,	\$200.00	   			
					(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Owner	pation / Job title (See Instruction	ns)	10 Employer (See In City Conservation					
	Date	Full name of contributor Friedman, Jeff	out-of-state PAC (ID#	<b>‡</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)			
•	11/05/2014	3500 Jefferson St Ste 110	City; State; Zip Code		\$350.00	1   			
		Austin, TX 78731			(If tennel outpide of	Texas, complete Schedule T)			
┝	Principal occur	bation / Job title (See Instruction	ne)	Employer (See In	<u> </u>	Texas, complete schedule 1)			
	Owner	MINOR THE LOCK MONAGED		Capra & Cavelll		<u> </u>			
	Date	Full name of contributor Garrison, Peggy	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/11/2014	Contributor address; 4313 Camacho St Austin, TX 78723	City; State; Zip Code		\$50.00	   			
					(If travel outside of	Texas, complete Schedule T)			
⊢	Principal occur	 pation / Job title (See Instruction	ns)	Employer (See In	<u></u>				
	Volunteer		/	AFAB Austin					
	Date	Full name of contributor Gaynor, Dan (Mr.)	out-of-state PAC (ID#	<u>;                                    </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/05/2014	Contributor address; 10901 Leafwood Ln Austin, TX 78750	City; State; Zip Code		\$350.00	   			
			_		(If travel outside of	Texas, complete Schedule T)			
	Principal occup Owner	oation / Job title (See Instruction	ns)	Employer (See In Design With Co					
	Date	Full name of contributor Gaynor, Lisa (Mrs.)	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/05/2014	Contributor address; 10901 Leafwood Ln Austin, TX 78750	City; State; Zip Code		\$350.00	   			
					/lf traval autoids =#	Texas, complete Schedule T)			
_	Principal occurs	eation / Job title (See Instruction	15)	Employer (See In	<u> </u>	revas, complete schedule 1)			
	Owner		·~,	Design With Co					

	The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 20	/51 Report: 23/78	
2	FILER NAME	Flannigan, James (Mr.)		1 <del>-</del>	3 ACCOUNT# 00629478	(Ethics Commission filers)	
4	Date	5 Full name of contributor Gerson, Lora Ann	out-of-state PAC (ID#	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/05/2014	6 Contributor address; 5206 Turnabout Ln Austin, TX 78731	City; State; Zip Code		\$25.00	 	
				_	(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	pation / Job title (See Instruction	ns)	10 Employer (See In	structions)		
	Date	Full name of contributor Gerson, Steve	☐ out-of-state PAC (ID#	<b>*</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/05/2014	Contributor address; 5206 Turnabout Ln Austin, TX 78731	City; State; Zip Code	, , , , , , , , , , , , , , , , , , , ,	\$25.00	;   	
}					iff travel outside of	Texas, complete Schedule T)	
_	Dein single angum	L	20)	Employer (See In		Texas, complete ochecole 17	
	Principal occup	ation / Job title (See Instruction		Employer (See III	structions)		
	Date	Full name of contributor Ghatalia, Ashwin	out-of-state PAC (ID#	<b>*</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/19/2014	Contributor address; 6202 Cape Cod Austin, TX 78746	City; State; Zip Code		\$150.00	   	
					Ļ.`	Texas, complete Schedule T)	
		pation / Job title (See Instruction Semiconductors Profession		Employer (See In Self-Employed	structions)		
	Date	Full name of contributor Gilby, Kim	out-of-state PAC (ID#	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/19/2014	Contributor address; 720 Nelson Ranch Rd Cedar Park, TX 78613	City; State; Zip Code		\$40.00	   	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)		
	Date	Full name of contributor Goble, Gary	out-of-state PAC (ID#	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/06/2014	14001 Avery Ranch Blvd #2302	City; State; Zip Code		\$350.00	   	
		Austin, TX 78717					
				_		Texas, complete Schedule T)	
	Principal occup Energy Consi	eation / Job title (See Instruction ultant	15)	Employer (See In MAC, Inc.	structions)		

### Texas Ethics Commission

### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

	OTTER THAN TELBOES ON ESANS						
	The Instruction	GUIDE explains how to complete this form.			1 PAGE# Schedule: 21	/51 Report: 24/78	
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT # 00629478	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state P Goetz, Patrick	PAC (ID#	<b>*</b> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/19/2014	6 Contributor address; City; State; Zip 503 Neiray Blvd Austin, TX 78751	Code		\$30.00	 	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Systems Adm	ation / Job title (See Instructions) ninistrator		10 Employer (See In: The University of			
	Date	Full name of contributor	AC (ID#	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/13/2014	Contributor address; City; State; Zip 2500 E 2nd St Austin, TX 78702	Code		\$200.00	 	
					•	Texas, complete Schedule T)	
	Principal occup Co-Founder	ation / Job title (See Instructions)		Employer (See In: Austin Compost			
	Date	Full name of contributor	AC (ID#	<b>!</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/05/2014	Contributor address; City; State; Zip 1500 W 24th St Austin, TX 78703	Code		\$350.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Economist	ation / Job title (See Instructions)		Employer (See In: Self-Employed	structions)		
	Date	Full name of contributor	AC (ID#	<b>!</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/19/2014	Contributor address; City; State; Zip 13401 Wisterwood St Austin, TX 78729	Code		\$150.00	   	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)		
	Date	Full name of contributor	AC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/14/2014	Contributor address; City; State; Zip 1510 W North Loop Blvd Unit 126	Code		\$150.00	 	
		Austin, TX 78756				 	
			····	<del></del>		Texas, complete Schedule T)	
	Principal occup Software Eng	ation / Job title (See Instructions) ineer		Employer (See In: SUSE LLC	structions)		

Texas Ethics Commission

	The Instruction	N GUIDE explains how to complete the	nis form.		1 PAGE# Schedule: 22	2/51 Report: 25/78
2	FILER NAMÉ	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ ou Grady, Brent	t-of-state PAC (ID#	<u>;                                    </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/19/2014	6 Contributor address; City; 2904-B Hampton Rd Austin, TX 78705	State; Zip Code		\$17.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See In	structions)	
	Date	Full name of contributor	t-of-state PAC (ID#	<u>;                                    </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; 9912 Morgan Creek Dr Austin, TX 78717	State: Zip Code		.\$50.00	   
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) hterprises, LLC		Employer (See In: Self-Employed	structions)	
	Date	Full name of contributor	t-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; 19912 Dornick Hills Ln Pflugerville, TX 78660	State; Zip Code		\$50.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Dentist	ation / Job title (See Instructions)		Employer (See In Cynthia L. Grav		
	Date	Full name of contributor	t-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; PO Box 200388 Austin, TX 78720	State; Zip Code		\$350.00	 
					(If travel outside of	Texas, complete Schedule 1)
	Principal occup Engineer	ation / Job title (See Instructions)		Employer (See In: CP&Y, Inc.	structions)	
	Date	Full name of contributor	t-of-state PAC (ID#	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/28/2014	Contributor address; City; 98005 Cahill Dr Austin, TX 78729	State; Zip Code		\$50.00	1 
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	- 1	Employer (See In:	structions)	<u> </u>
	Environmenta	ıl Planner		Parsons Brincke	erhoff	

# **POLITICAL CONTRIBUTIONS**

	OTHER	THAN PLEDGES OR LOAD	<b>N</b> 5		
	The Instruction	אס Guide explains how to complete this form.	<del></del>	1 PAGE # Schedule: 23	/51 Report: 26/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hanvey, Phyllis	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/19/2014	6 Contributor address; City; State; Zip Code 9603 Woodvale Dr Austin, TX 78729		\$30.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Harp, James	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 6702 Langston Dr Austin, TX 78723		\$50.00	 
				<u> </u>	Texas, complete Schedule T)
ļ	Principal occup Real Estate A	pation / Job title (See Instructions) Agent	Employer (See In Retired	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Hartman, Amy	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/26/2014	Contributor address; City; State; Zip Code 2002 Arpdale St Austin, TX 78704		\$50.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate A	ation / Job title (See Instructions) Agent	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; City; State; Zip Code 5805 Carry Back Austin, TX 78746		\$350.00	[   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup N/A	ation / Job title (See Instructions)	Employer (See In None	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; City; State; Zip Code 5805 Carry Back Austin, TX 78746		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In: Armbrust & Bro		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 24	1/51 Report: 27/78		
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)		
4	Date	5 Full name of contributor  ut-of-state PAC (ID) Heinrich, Tammy	<del>*</del> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/21/2014	6 Contributor address; City; State; Zip Code 6303 Kury Lane Houston, TX 77008		\$250.00	 		
ᆫ				<u> </u>	Texas, complete Schedule T)		
9	Principal occup Pastor	pation / Job title (See Instructions)	10 Employer (See In Terrace United	structions) Methodist Church	1		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/21/2014	Contributor address; City; State; Zip Code 6303 Kury Lane Houston, TX 77008		\$250.00	!   		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Self-Employed	structions)			
,	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/07/2014	Contributor address; City: State; Zip Code 908 Terrace Mountain Dr Austin, TX 78746		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Lawyer	pation / Job title (See Instructions)	Employer (See In Ikard Wynne, L				
	Date	Full name of contributor	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/03/2014	Contributor address; City; State; Zip Code 2303 Windsor Austin, TX 78703		\$350.00	   		
	l			(If travel outside of	Texas, complete Schedule T)		
	Principal occup Rancher	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)			
	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/03/2014	Contributor address; City; State; Zip Code 2303 Windsor Austin, TX 78703		\$350.00	   		
				(If travel outside of	Texas, complete Schedule T)		
-	Principal occup Real Estate	pation / Job title (See Instructions)	Employer (See In HPI Real Estate	structions)	TOWNS ON THE PROPERTY OF THE P		

	OTTEN THAN TELBOLO ON LOANS						
	The Instruction	N Guide explains how to comp	plete this form.		1 PAGE # Schedule: 25	/51 Report: 28/78	
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT # 00629478	(Ethics Commission filers)	
4	Date	<b>5</b> Full name of contributor Hobbs, Jeff	☐ out-of-state PAC (ID#	<u>;                                    </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/05/2014	6 Contributor address; 9 3700 Hillbrook Dr Austin, TX 78731	City; State; Zip Code		\$350.00	 	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Attorney	ation / Job title (See Instructions	s)	10 Employer (See In: Armbrust & Brown			
	Date	Full name of contributor Hobbs, Lisa	□ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/05/2014	Contributor address; (3700 Hillbrook Dr Austin, TX 78731	City; State; Zip Code		\$350.00	   	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	ation / Job title (See Instructions	5)	Employer (See In: KuhnHobbs PLI			
	Date	Full name of contributor Houlihan, Jennifer	out-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2014	Contributor address; (12112 Eruzione Dr Austin, TX 78748	City; State; Zip Code		\$25.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Non-Profit Ad	ation / Job title (See Instructions min	5)	Employer (See In: Austin Music Pe			
	Date	Full name of contributor Hudspeth, Ann	☐ out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/07/2014	Contributor address; (8010 Stillwood Ln Austin, TX 78757	City; State; Zip Code		\$50.00		
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Designer	ation / Job title (See Instructions	3)	Employer (See In: Deil	structions)		
	Date	Full name of contributor Hurta, Michael	ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/28/2014	Contributor address; 0 1407 W 39th 1/2 St Unit 203 Austin, TX 78756	City; State; Zip Code		\$25.00	 	
L					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Student	ation / Job title (See Instructions	S)	Employer (See Ins N/A	structions)		

#### TDD 1-800-735-2989 Austin, Texas 78711-2070 (512)463-5800 Texas Ethics Commission P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 26/51 Report: 29/78 3 ACCOUNT # (Ethics Commission filers) Flannigan, James (Mr.) 2 FILER NAME 00629478 5 Full name of contributor ☐ out-of-state PAC (ID# C00027342 ) Amount of In-kind contribution Date contribution (\$) description (if applicable) International Brotherhood of Electrical Workers PAC 11/22/2014 6 Contributor address; City; State; Zip Code \$350.00 900 7th St NW Washington, DC 20001 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) 9 Principal occupation / Job title (See Instructions) In-kind contribution Date Full name of contributor □ out-of-state PAC (ID# Amount of contribution (\$) description (if applicable) Islam, Rashed \$100.00 11/19/2014 Contributor address: City: State: Zip Code 11901 Palisades Pkwy Austin, TX 78732 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Vice President **HDR** In-kind contribution Amount of Date description (if applicable) contribution (\$) Jack, James 12/06/2014 Contributor address: City; State; Zip Code \$25.00 2008 B Rabb Glen Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self-Employed Architect In-kind contribution Date Full name of contributor ut-of-state PAC (ID# Amount of contribution (\$) description (if applicable) Jackson, Charlie Contributor address; City; State; Zip Code \$100.00 11/14/2014 11900 Metric Blvd J163 Austin, TX 78758 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Technologist Acceleros Full name of contributor ut-of-state PAC (ID#) In-kind contribution Date Amount of contribution (\$) description (if applicable) Jones, Annette Contributor address; 12/04/2014 City; State; Zip Code \$350.00 519 Buckeye Trl Austin, TX 78746 (If travel outside of Texas, complete Schedule T)

Employer (See Instructions)

None

Principal occupation / Job title (See Instructions)

None

	OTTLEN	THAN I LEBGES ON LOAD	10		
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 27	7/51 Report: 30/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDE Jones, Ken	<u>*</u> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/04/2014	6 Contributor address; City; State; Zip Code 519 Buckeye Tri Austin, TX 78746		\$350.00	   
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Armbrust & Bro		
	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 1203A Elm St Austin, TX 78703		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Community V	ation / Job title (See Instructions) olunteer	Employer (See In Retired	structions)	• "
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/22/2014	Contributor address; City; State; Zip Code 1602 Balmorhea Ln Round Rock, TX 78664		\$25.00	 
					Texas, complete Schedule T)
	Principal occup Consultant	eation / Job title (See Instructions)	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	<b>‡</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 4231 Westlake Dr Austin, TX 78746		\$25.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Director	ation / Job title (See Instructions)	Employer (See In Coats Rose	structions)	
	Date	Full name of contributor	<u>;                                    </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 2704 Woodland Hills Cv Austin, TX 78732		\$50.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

-	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	954 Departs 24/79
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	/51 Report: 31/78  (Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Kang, Sung	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/19/2014	6 Contributor address; City; State; Zip Code 5903 Pecanwood Ln Austin, TX 78749		\$50.00	 
				(If travel outside of	Texas, complete Schedule T)
9		ation / Job title (See Instructions) Quality Assurance/Business Analyst	10 Employer (See In NWL Insurance		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; City; State; Zip Code 301 E 4th St Unit 309		\$350.00	   
		Austin, TX 78701		(If travel outside of	1 Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Computer Pro	ogrammer 	Qcue, Inc.		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 7914 Bee Caves Rd Austin, TX 78746		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Encotech Engin	structions) leering Consultant	ds
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 10524 Roy Butler Dr Austin, TX 78717		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In ATX Environme		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 10524 Roy Butler Dr Austin, TX 78717		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Sarah Kim Dan		

Texas Ethics Commission

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
	The Instruction	ON GUIDE explains how to complete this form.	-	1 PAGE#	/51 Report: 32/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# King, David	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/14/2014	6 Contributor address; City; State; Zip Code 1808 Kerr St Austin, TX 78704		\$100.00   	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 463 Wesfield Blvd #525		\$20.00	
		Austin, TX 76502		(If travel outside of	Texas, complete Schedule T)
	Principal occup Program Mar	pation / Job title (See Instructions) nager	Employer (See In Federal Govern		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 10702 Hastings Ln Austin, TX 78750		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Armbrust & Bro		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 10702 Hastings Ln Austin, TX 78750		\$350.00	
				L <b>.</b>	Texas, complete Schedule T)
	Principal occup N/A	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/03/2014	Contributor address; City; State; Zip Code 2925 Briarpark Dr Fourth Floor		\$350.00	
		Houston, TX 77042		HE American and 11 and	, , , , , , , , , , , , , , , , , , ,
	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	. Timospan vooup	and (occ monocaula)	2		

Texas Ethics Commission

L					
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 30	)/51 Report: 33/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Landuyt, Noel	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/07/2014	6 Contributor address; City; State; Zip Code 10100 Lachlan Dr Austin, TX 78717		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Administrator	ation / Job title (See Instructions)	10 Employer (See In The University	structions) of Texas at Austin	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 9420 Spring Hollow Dr Austin, TX 78750	,	\$100.00	 
				(If traval outside of	Texas, complete Schedule T)
┝	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete schedule 1)
	N/A		Retired		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/13/2014	Contributor address; City; State; Zip Code 803 Avondale Rd Austin, TX 78704		\$150.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Fiscal Analys	ation / Job title (See Instructions) t	Employer (See In Center for Publ	structions) ic Policy Priorities	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 204 Westhaven Dr Austin, TX 78746		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Armbrust & Bro		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code PO Box 5843 Austin, TX 78763		\$350.00	! ! !
				(if traval autoids -5	Texas, complete Schedule T)
$\vdash$	Principal occurs	ation / Job title (See Instructions)	Employer (See In	<u> </u>	rexas, complete Schedule 1)
	. i.i.upui vooup	and food mondations)	p.090/ (000 III		

	OTTER THAN I LEDGES OR LOANS						
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 31	/51 Report: 34/78		
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Lopez, Jennifer	<del>*</del> )	7 Amount of contribution (\$)	8		
	11/28/2014	6 Contributor address; City; State; Zip Code 10305 Jmes Ryan Way Austin, TX 78730		\$100.00	   		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Director of Co	oation / Job title (See Instructions) ompliance	10 Employer (See In National Nursin				
	Date	Full name of contributor	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/02/2014	Contributor address; City; State; Zip Code 9001 Scotland Well Cv Austin, TX 78750	• • • • • • • • • • • • • • • • • • • •	\$50.00	 		
					Texas, complete Schedule T)		
	Principal occup President	pation / Job title (See Instructions)	Employer (See In Austin/Travis C	structions) ounty EMS Emplo	eyee Association		
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/20/2014	Contributor address; City; State; Zip Code 2212 Windsor Rd E Austin, TX 78703		\$350.00	<u> </u>		
				(If travel outside of	Texas, complete Schedule T)		
┝	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u>'</u>	Texas, complete ochedule 1)		
	Real Estate	otion, one time (eee monastione)	Endeavor Real				
	Date	Full name of contributor □ out-of-state PAC (ID# Mason, Barbara	<u></u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/06/2014	Contributor address; City; State; Zip Code 9550 Savannah Ridge Dr Unit 17		\$50.00	 		
1		Austin, TX 78726		(If traval outside of	Texas, complete Schedule T)		
<del> </del>	Principal occup	vation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete ochequie 17		
	N/A	· · · · · · · · · · · · · · · · · · ·	Retired	,			
	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/11/2014	Contributor address; City; State; Zip Code 12510 Shasta Lane Austin, TX 78729		\$25.00	   		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In N/A	structions)	_		

# **POLITICAL CONTRIBUTIONS**

	OTHER	THAN PLEDGES OR LOAI	NS 		
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 32	/51 Report: 35/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≉ Mehdy, Mona	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/20/2014	6 Contributor address; City; State; Zip Code 5004 Smokey Mountain Dr Austin, TX 78727		\$15.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Professor	nation / Job title (See Instructions)	10 Employer (See In The University of	structions) of Texas at Austin	
	Date	Full name of contributor  ut-of-state PAC (ID# Mehdy, Mona	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/06/2014	Contributor address; City; State; Zip Code 5004 Smokey Mountain Dr Austin, TX 78727		\$15.00	 
					Texas, complete Schedule T)
	Principal occup Professor	nation / Job title (See Instructions)	Employer (See In The University of	structions) of Texas at Austin	
	Date	Full name of contributor  ut-of-state PAC (ID# Melancon, Rebecca	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 509 E 38th St Austin, TX 78705		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Executive Dir	eation / Job title (See Instructions) ector	Employer (See In: Austin Independ	structions) dent Business Allia	ance
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 9824 Maudeville Cir Austin, TX 78750		\$25.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; City; State; Zip Code 40 N IH-35 12 A3 Austin TX 78701		\$100.00	
		Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
Т		ation / Job title (See Instructions)	Employer (See In:	structions)	<u> </u>
	Author/Inspira	ational Speaker	Self-Employed		

# Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

# **POLITICAL CONTRIBUTIONS**

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	on Guide explains how to complete this form.	<u></u>	1 PAGE # Schedule: 33/51 Report: 36/78		
2	FILER NAME	Flannigan, James (Mr.)	_	3 ACCOUNT# 00629478	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Miller, Kent	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/19/2014	6 Contributor address; City; State; Zip Code 13204 Tamayo Austin, TX 78729		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup N/A	pation / Job title (See Instructions)	10 Employer (See In Retired	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/19/2014	Contributor address; City; State; Zip Code 10017 Woodland Village Dr Austin, TX 78750		\$35.00	 	
_					Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Project Manager/Archeologist			Employer (See Instructions) AmaTerra Environmental Inc			
	Date	Full name of contributor  ut-of-state PAC (ID# Minor, Louie	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/02/2014	Contributor address; City; State; Zip Code 2118 W Hwy 190 Belton, TX 76513		\$50.00	 	
				<u>L : </u>	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Construction		Employer (See In Self-Employed	er (See Instructions) nployed		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/23/2014	Contributor address; City; State; Zip Code PO Box 4023 Austin, TX 78765		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Investor		Employer (See In Self-Employed	Employer (See Instructions) Self-Employed		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/18/2014	Contributor address; City; State; Zip Code 3212 Baer St Houston, TX 77020		\$100.00	   	
				(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Consultant			Employer (See In Andrews Kurth	(See Instructions) Kurth LLP		
= =:: <del>= =::=</del> ::						

<b>└</b> ──					
The	Instruction	DN GUIDE explains how to complete this form.		1 PAGE# Schedule: 34	//51 Report: 37/78
2 FILER	R NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
<b>4</b> Da	ite	5 Full name of contributor ☐ out-of-state PAC (ID# Moreau, Walter	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/1	5/2014	6 Contributor address; City; State; Zip Code 1400 Spring Garden Austin, TX 78746		\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
	ipal occup -Profit	pation / Job title (See Instructions)	10 Employer (See In Foundation Cor		
Da	ite	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/19	9/2014	Contributor address; City; State; Zip Code 12302 Saber Trl Austin, TX 78750		\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
Princi Clerç		Dation / Job title (See Instructions)	Employer (See In Retired		
Da	ate	Full name of contributor  ut-of-state PAC (ID# Morgan, John	<u>;                                    </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/10	0/2014	Contributor address; City; State; Zip Code 11504 Tanglebriar Trail Austin, TX 78750		\$50.00	   
				1 '	Texas, complete Schedule T)
	ipal occup tenant C	pation / Job title (See Instructions) olonel	Employer (See In US Army, Retire		
Da	ite	Full name of contributor ☐ out-of-state PAC (ID# Morgan, John	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/22	2/2014	Contributor address; City; State; Zip Code 11504 Tanglebriar Trail Austin, TX 78750		\$30.14	1 
				(If travel outside of	Texas, complete Schedule T)
		pation / Job title (See Instructions)	Employer (See In		
Lieut	tenant C	olonel	US Army, Retire	ed 	
Da	ite	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/04	4/2014	Contributor address; City; State; Zip Code 1004 Jousting Place Austin, TX 78746		\$350.00	!   
				(If travel outside of	Texas, complete Schedule T)
Princi Engli		pation / Job title (See Instructions)	Employer (See In King Engineerir		

	The Instruction	N GUIDE explains how to complete this fo	orm.	-	1 PAGE# Schedule: 35	i/51 Report: 38/78
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor  ut-of-s  out-of-s	tate PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; City; State 1406 S Plum St Seattle, WA 98144	; Zip Code		\$50.00	 
					(If travel outside of	Texas, complete Schedule T)
9		ation / Job title (See Instructions) ales Operations		10 Employer (See In Tango Card	structions)	
	Date	Full name of contributor	tate PAC (ID#	<b>;</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State 1406 S Plum St Seattle, WA 98144	; Zip Code		\$250.00	 
					(If travel outside of	Texas, complete Schedule T)
H	Principal occup	ation / Job title (See Instructions)		Employer (See In		
	Analyst			Covario		
	Date	Full name of contributor	tate PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State 110 Wyndham Dr NW Atlanta, GA 30328	; Zip Code		\$100.00	 
Ĺ						Texas, complete Schedule T)
	Principal occup Corporate Co	ation / Job title (See Instructions) unsel		Employer (See In: Cox Communic		
	Date	Full name of contributor	tate PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/30/2014	Contributor address; City; State 605 W 10th St Austin, TX 78701	; Zip Code		\$100.00	   
					(if travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)		Employer (See In: Granger Muelle		
	Date	Full name of contributor	tate PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State 4418 N Racine #2N	; Zip Code		\$50.00	   
		Chicago, IL 60640			(If travel outside of	Texas, complete Schedule T)
$\vdash$	Principal occur	ation / Job title (See Instructions)	1	Employer (See in:	•	
	President			Blueprint Camp		

	The Instruction	Guide explains how to complete this form.		1 PAGE# Schedule: 36	/51 Report: 39/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ngo, Chau	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/22/2014	6 Contributor address; City; State; Zip Code 9218 Balcones Club Dr #2721		\$10.00	 
		Austin, TX 78750		(If travel outside of	Texas, complete Schedule T)
9	Principal occup Admin Associ	pation / Job title (See Instructions) iate	10 Employer (See In The University of	structions) of Texas at Austin	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Noonal, Coral	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State; Zip Code 1566 CR 316 Lexington, TX 78947		\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Vice Presider	pation / Job title (See Instructions)	Employer (See In National Americ		
	vice Presider		National Americ	an Oniversity	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code PO Box 29446 Austin, TX 78755		\$200.00	 
		Adding TX 75.00		(If travel outside of	Texas, complete Schedule T)
	Principal occup	nation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/13/2014	Contributor address; City; State; Zip Code 3302 Far View Dr Austin, TX 78730		\$350.00	 
				<u> </u>	Texas, complete Schedule T)
	Principal occup Chief Executi	vation / Job title (See Instructions) ve Officer	Employer (See In Excel Global Pa		
	Date	Full name of contributor  ut-of-state PAC (ID# Orta, Jose	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 1320 Howard Taylor, TX 76574		\$50.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup N/A	ation / Job title (See Instructions)	Employer (See In Retired	<u> </u>	· <del>-</del>

### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

# **POLITICAL CONTRIBUTIONS**

	OTHER	THAN PLEDGES OR LOAD	NS 		
	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 37	/51 Report: 40/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Park, Yonglark	)	7 Amount of contribution (\$)	8
	11/21/2014	6 Contributor address; City; State; Zip Code 10713 Bay Laurel Trl Austin, TX 78750		\$20.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID# Pastor, Andrew	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/27/2014	Contributor address; City; State; Zip Code 2908 Sparkling Brook Ln Austin, TX 78746	•••••	\$350.00	 
				<u> </u>	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Endeavor	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 10020 Valona Dr Austin, TX 78717		\$50.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup N/A	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763		\$250.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup General Cont	ation / Job title (See Instructions) ractor	Employer (See In J Pinelli Compa		
	Date	Full name of contributor  ut-of-state PAC (ID# Pinnelli, Joseph	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763		\$250.00	 
				(If travel outside of	Texas, complete Schedule T)
_		ation / Job title (See Instructions)	Employer (See In		
	General Cont	ractor	J Pinelli Compa	ny LLC	

#### Austin, Texas 78711-2070 (512)463-5800

# **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

	O I I I L I I				
	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 38	3/51 Report: 41/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (I Plummer, Douglas	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/13/2014	6 Contributor address; City; State; Zip Code 301 E 35th St Austin, TX 78705		\$350.00	 
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup Manager	nation / Job title (See Instructions)	10 Employer (See Ir Ishmael Law Fi		
	Date	Full name of contributor  ut-of-state PAC (I Poore, Megan	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 8420 Cahill Dr Austin, TX 78729	<b>;</b>	\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
H		pation / Job title (See Instructions)	Employer (See In		
	Financial Adv	riser	Lucien, Stirling	and Gray, Adviso	ry Group, Inc.
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 5010 Finley Dr Austin, TX 78731	:	\$25.00	1 ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See Ir N/A	nstructions)	
	Date	Full name of contributor	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; City; State; Zip Code 8600 N FM 620 #210 Austin. TX 78726	· · · · · · · · · · · · · · · · · · ·	\$25.00	I I I
				(If travel outside of	Texas, complete Schedule T}
		ation / Job title (See Instructions) essor of Government	Employer (See In Austin Commu		
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/08/2014	Contributor address; City; State; Zip Code 11203 Thorny Brook Trail Austin, TX 78750		\$150.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Child Safety I	ation / Job title (See Instructions) Program	Employer (See In City of Austin	<u> </u>	<u> </u>

L		- <u>-</u>				
	The Instruction	on Guide explains how to com	plete this form.		1 PAGE# Schedule: 39	1/51 Report: 42/78
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	<b>5</b> Full name of contributor Prim, Philip	☐ out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/20/2014	6 Contributor address; 2609 Pembrook Trl Austin, TX 78731	City; State; Zip Code		\$350.00	! !
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired Reve	ation / Job title (See Instruction rend	ns)	10 Employer (See In Retired	structions)	
	Date	Full name of contributor Ramon, Daniel	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/22/2014	Contributor address; 1423 Ridgehaven Dr Austin, TX 78723	City; State; Zip Code		\$350.00	 
					'	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instruction	ns)	Employer (See In Graves, Dough	structions) erty, Hearon, & M	oody, P.C.
	Date	Full name of contributor Reck, Jennifer	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; 11403 Santa Cruz Austin, TX 78759	City; State; Zip Code		\$15.00	** ** ** ** ** ** ** ** ** ** ** ** **
					ļ ,	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instruction	ns)	Employer (See In Texas Associat	structions) ion of School Boa	rds
	Date	Full name of contributor Reck, Jennifer	□ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/13/2014	Contributor address; 11403 Santa Cruz Austin, TX 78759	City; State; Zip Code	. ,	\$25.00	 
ŀ					(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instruction	ns)	Employer (See In Texas Associat	structions) ion of School Boa	rds
	Date	Full name of contributor Reed, Susan	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution   description (if applicable)
	10/29/2014	Contributor address; 12200 Waterside Trail Austin, TX 78750	City; State; Zip Code		\$50.00	 
-					distances a sector	·
<u> </u>	Dalasia at assess	ation J Joh Hills /Con Janeau -41	·	Employer (Con In	1 `	Texas, complete Schedule T)
	Volunteer	ation / Job title (See Instruction	15)	Employer (See In Retired	suuciions)	

# POLITICAL CONTRIBUTIONS

	OTHER	THAN PLEDGES OR LUAI			
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 40	/51 Report: 43/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#Reed, Susan	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
İ	12/06/2014	6 Contributor address; City; State; Zip Code 12200 Waterside Trail Austin, TX 78750		\$50.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Volunteer	vation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID≰ Rifai, D'Ann	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; City; State; Zip Code 8621 Lemens Spice Trail Austin, TX 78750		\$150.00	 
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID: Roche, David	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; City; State; Zip Code 1600 Mount Larson Rd Austn, TX 78746		\$350.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate F	eation / Job title (See Instructions) Partner	Employer (See In Endeavor Real		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/03/2014	Contributor address; City; State; Zip Code 11201 Brista Way Austin, TX 78726		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In Rygler and Ass		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 810 N Avenue H Elgin, TX 78621	,	\$15.00	 
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In	structions)	
	Theater Tech	nician	State Preservat	ion Board	

				_	<del></del>
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 41	/51 Report: 44/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Scarborough, Alix	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/18/2014	6 Contributor address; City; State; Zip Code 4539 Guadalupe St #A301 Austin, TX 78751		\$20.00	       Texas, complete Schedule T)
<u> </u>				<u> </u>	Texas, complete ochecule 1)
9	Principal occup Planner	pation / Job title (See Instructions)	10 Employer (See In Black & Vernoo		
	Date	Full name of contributor  ut-of-state PAC (ID Schmidt, Jim	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code 2006 18th Ave S Nashville, TN 37212	• · · · · · · · · · · · · · · · · · · ·	\$50.00	{ 
		Nashville, TN 37212		(If travel outside of	Texas, complete Schedule T)
_			F ( %)		Toxas, complete contests 1/
	Principal occup President	pation / Job title (See Instructions)	Employer (See In Schmidt Govern	nment Solutions L	rc
	Date	Full name of contributor	#	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 10807 Keystone Bend Austin, TX 78750		\$350.00	   
				`	Texas, complete Schedule T)
	Principal occup Landscape A	pation / Job title (See Instructions) rchitect	Employer (See In dwg.	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/07/2014	Contributor address; City; State; Zip Code 1101 Enfield Austin, TX 78703		\$350.00	 
l				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	n-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300		\$350.00	 
		Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
$\vdash$	Principal occurs	pation / Job title (See Instructions)	Employer (See In		
	Attorney	anom no tile (see instructions)	Armbrust & Bro		

# **POLITICAL CONTRIBUTIONS**

	OTHER	THAN PLEDGES OR LUAI	42		
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 42	/51 Report: 45/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Scrafford, Nora	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/04/2014	6 Contributor address; City; State; Zip Code 100 Congress Ave Suite 1300 Austin, TX 78701		\$350.00	 
		<u>.                                    </u>	,-	<u> </u>	Texas, complete Schedule T)
9	Principal occup None	ation / Job title (See Instructions)	10 Employer (See In None	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID# Seals, Chris	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code 121 S Goliad #4		\$200.00	    -
		Amarillo, TX 79106		(Network outside of	Texas, complete Schedule T)
_	Bringing occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete screedile 1)
	CEO	Mailour 7 Job Bile (See Instructions)	Self-Employed	si ucions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/22/2014	Contributor address; City; State; Zip Code 1822 W 10th St Austin, TX 78703		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In N/A	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; City; State; Zip Code 3416 Inwood Cove Round Rock, TX 78681		\$50.00	 
İ				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	<del></del>
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; City; State; Zip Code 3416 Inwood Cove Round Rock, TX 78681		\$50.00	! 
				(If travel outside of	Texas, complete Schedule T)
$\vdash$	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	
	·		·		

# SCHEDULE A

### **POLITICAL CONTRIBUTIONS** OTHER THAN DI EDGES OF LOAMS

	OTTILIN	THAN PLEDGES OR LOAD	<del></del>		
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 43	/51 Report: 46/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Sheppard, Jade	<u>;                                    </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/20/2014	6 Contributor address; City; State; Zip Code 12425 Dorsett Rd Austin, TX 78727		\$150.00	   
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Engineering	ation / Job title (See Instructions)	10 Employer (See In Gideon	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; City; State; Zip Code 1800 New York Ave Austin, TX 78702		\$50.00	   
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) rces Engineer	Employer (See In City of Austin	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 2815 Waterbank Cv Austin, TX 78746		\$250.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Director	ation / Job title (See Instructions)	Employer (See In Buffett Palace,		_
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 2815 Waterbank Cv Austin, TX 78746		\$250.00	l   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Co-Owner	ation / Job title (See Instructions)	Employer (See In Buffet Palace	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 1101 Anderson Ln Austin, TX 78757		\$200.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Cremagrande	ation / Job title (See Instructions)	Employer (See In: Amy's Ice Crear		

# POLITICAL CONTRIBUTIONS

12/03/2014 6 Contributor address; 13100 Amaga Springs Rd Austin, TX 78727 [(if travel outside of Texas, complete Schedule T)]  9 Principal occupation / Job title (See Instructions)  Date   Full name of contributor		OTHER	THAN PLEDGES OR LOAI	NS 		
Date   S Full name of contributor   out-of-state PAC (ID#   S Full name of contribution (S)   Sisson, John   12/03/2014   S Contributor address, Sisson of the state PAC (ID#   South of the state of Texas, complete Schedule T)   T/17/2014   South of the state PAC (ID#   State: Zip Code   S 100.00   South of the state PAC (ID#   Should not state PAC (ID#   Sisson of the state of Texas, complete Schedule T)   Principal occupation / Job title (See Instructions)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson of the state outside of Texas, complete Schedule T)   Sisson o		The Instruction	ON GUIDE explains how to complete this form.			/51 Report: 47/78
Sisson, John  12/03/2014 6 Contributor address; 13100 Amagas Springs Rd Austin, TX 78727 (if travel outside of Texas, complete Schedule T)  9 Principal occupation / Job title (See instructions)  Date Full name of contributor contributor Skotak, Kim   Contributor address; 10827 Brambiacrest Dr Austin, TX 78726 (if travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See instructions)  Date Full name of contributor   out-of-state PAC (IDW   Amount of contribution (s)   description (if applicable to the following properties of the	2	FILER NAME	Flannigan, James (Mr.)	-		(Ethics Commission filers)
13100 Amaga Springs Rd Auslin, TX 78727   (If travel outside of Texas, complete Schedule T)	4	Date		<u> </u>		8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)   10 Employer (See Instructions)		12/03/2014	13100 Armaga Springs Rd		\$20.00	   
Date   Full name of contributor   out-of-state PAC (ID#   Amount of contribution (S)   In-kind contrib					(If travel outside of	Texas, complete Schedule T)
Skotak, Kim    11/17/2014   Contributor address;   City; State; Zip Code   \$100.00	9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
Date   Full name of contributor   out-of-state PAC (ID#	-	Date		<u> </u>		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)  Stay-at-Home Mom    Employer (See Instructions)   Employer (See Instructions)   In-kind contribution   Smith, Chuck   Ontribution   Out-of-state PAC (ID#		11/17/2014	10627 Bramblecrest Dr		\$100.00	 
Stay-at-Home Mom    N/A						Texas, complete Schedule T)
Smith, Chuck  Contribution (\$)   description (if applicable contribution (\$)   description (if applicable contribution (\$)   description (if applicable contribution (\$)   description (if applicable contribution (\$)   1713 Newfield Ln Austin, TX 78703  Principal occupation / Job title (See Instructions)  Executive Director  Date  Full name of contributor   out-of-state PAC (ID#   Ontributor (ID#   Ontribut					structions)	
1713 Newfield Ln   Austin, TX 78703   (If travel outside of Texas, complete Schedule T)		Date	·	<u> </u>		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)  Executive Director    Date		11/22/2014	1713 Newfield Ln		\$100.00	   
Executive Director    Equality Texas					(If travel outside of	Texas, complete Schedule T)
Smith, Mona  Contribution (\$) description (if applicable description (if ap					structions)	
4508 41st Ave Seattle, WA 98118  Principal occupation / Job title (See Instructions) Attorney  Employer (See Instructions) Self-Employed  Amount of In-kind contribution contribution (\$) description (if applicable PO Box 152592 Austin, TX 78715  (If travel outside of Texas, complete Schedule T)  (If travel outside of Texas, complete Schedule T)		Date	· ·	<u> </u>		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney    Date		11/18/2014	4508 41st Ave		\$100.00	 
Attorney  Date Full name of contributor South Austin Democrats  11/12/2014 Contributor address: PO Box 152592 Austin, TX 78715  Amount of contribution (\$)   In-kind contribution (if applicable \$200.00   \$200.00    (If travel outside of Texas, complete Schedule T)					(If travel outside of	Texas, complete Schedule T)
South Austin Democrats  11/12/2014  Contributor address: City; State; Zip Code PO Box 152592 Austin, TX 78715  (If travel outside of Texas, complete Schedule T)		•	ation / Job title (See Instructions)		structions)	
PO Box 152592 Austin, TX 78715  (If travel outside of Texas, complete Schedule T)		Date		<u> </u>		In-kind contribution description (if applicable)
		11/12/2014	PO Box 152592		\$200.00	<b>!</b>   
Principal occupation / Job title (See Instructions)  Employer (See Instructions)					(If travel outside of	Texas, complete Schedule T)
		Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

The INSTRUCTION GUIDE explains how to complete this form.	1 PAGE # Schedule: 45/51 Report: 48/78
2 FILER NAME Flannigan, James (Mr.)	3 ACCOUNT # (Ethics Commission filers) 00629478
4 Date 5 Full name of contributor ☒ out-of-state PAC (ID#_ Southwest Laborer's District Council PAC	) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
11/17/2014 6 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)
9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Date Full name of contributor ☐ out-of-state PAC (ID#_ Stanley, Alfred	Amount of In-kind contribution contribution (\$) description (if applicable)
11/05/2014 Contributor address; City; State; Zip Code 1409 Hardouin Ave Austin, TX 78703	\$100.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) President	Employer (See Instructions) FireWatch Texas
Date Full name of contributor ☐ out-of-state PAC (ID#_ Stanley, Alfred	) Amount of In-kind contribution contribution (\$) description (if applicable)
11/22/2014 Contributor address; City; State; Zip Code 1409 Hardouin Ave Austin, TX 78703	\$100.00   
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) President	Employer (See Instructions) FireWatch Texas
Date Full name of contributor  ut-of-state PAC (ID#_ Stempko, Jessica	) Amount of In-kind contribution contribution (\$) description (if applicable)
11/19/2014 Contributor address; City; State; Zip Code 8405 Sea Ash Cir Round Rock, TX 78681	\$25.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor ☐ out-of-state PAC (ID#_ Stern, Lonny	Amount of In-kind contribution contribution (\$) description (if applicable)
11/09/2014 Contributor address; City; State; Zip Code 2929A E 13th St Austin, TX 78702	\$200.00
703uii, 17/10/02	{  (If travel outside of Texas, complete Schedule T} □
Principal occupation / Job title (See Instructions) Business Development Director	Employer (See Instructions) Skillpoint Alliance

L		<u></u>			
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	5/51 Report: 49/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor	<u>*                                    </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/01/2014	6 Contributor address; City; State; Zip Code 1801 Anita Dr Austin, TX 78704		\$50.00	 
1				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Real Estate B	pation / Job title (See Instructions) Broker	10 Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code PO Box 40898 Austin, TX 78704		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
r	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<b>*</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/25/2014	Contributor address; City: State; Zip Code 6503 Delmonico Dr Austin, TX 78759		\$350.00	[   
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) d Pres. RCCA	Employer (See In Stan's Heat and		
	Date	Full name of contributor	<u>-</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 100 Congress Ave Austin, TX 78701		\$25.00	[ } 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Artist	pation / Job title (See Instructions)	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 100 Congress Ave Austin, TX 78701		\$25.00	 
				(If travel outside of	Texas, complete Schedule T)
_		pation / Job title (See Instructions)	Employer (See In Armbrust & Bro	structions)	. constant of industry
	Attorney			WII, FLEC	

L					
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 47	7/51 Report: 50/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Sw LIUNA PAC	:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/17/2014	6 Contributor address; City; State; Zip Code 5555 N Lamar Blvd Ste E121 Austin, TX 78751		\$350.00	   
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 1102 Claire Ave Austin, TX 78703		\$100.00	 
				<u> </u>	Texas, complete Schedule T)
	Principal occup Student	vation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code 407 Swanee Unit A Austin, TX 78752		\$30.00	 
	Drive size of a service	otion / Joh title (Coe Instructions)	Employer (See In	-	Texas, complete schedule 1)
		eation / Job title (See Instructions) ector of Communications & Community	Austin ISD	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State; Zip Code 360 N Sierra Bonita Ave #329 Los Angeles, CA 90036		<b>\$2</b> 5.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Freelance IT	ation / Job title (See Instructions) Support	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 3105 Bowman Austin, TX 78703		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate In	ation / Job title (See Instructions) nvestment	Employer (See In FourT Realty	structions)	

	The Instruction	Guide explains how to complete this form.		1 PAGE# Schedule: 48	3/51 Report: 51/78
2	FILER NAME	Flannigan, James (Mr.)		3 ACCOUNT # 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Thomas, David	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/06/2014	6 Contributor address; City; State; Zip Code 2004-B E 9th St Austin, TX 78702	• • • • • • • • • • • • • • • • • • • •	\$20.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Photographer	ation / Job title (See Instructions)	10 Employer (See In David Thomas	structions) Photography - Au	stin
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/09/2014	Contributor address; City; State; Zip Code 210 Lavaca Unit 2602 Austin, TX 78701		\$200.00	'   
		Additi, 1270701		(If travel outside of	Texas, complete Schedule T)
	Principal occup Entreprenuer	ation / Job title (See Instructions)	Employer (See In The Great Outd		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Austin Chronicle
	12/03/2014	Contributor address; City; State; Zip Code PO Box 684263 Austin, TX 78768	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	Advertisement   
	:			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 13355 N US Hwy 183 Apt 1032 Austin, TX 78750		\$30.00	 
		,		(If travel outside of	Texas, complete Schedule T)
	Principal occup Artist	ation / Job title (See Instructions)	Employer (See in Self-Employed	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; City, State; Zip Code 1704 Kerr Ave Austin, TX 78704		\$25.00	1   
				(if travel outside of	Texas, complete Schedule T)
$\vdash$	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

# **POLITICAL CONTRIBUTIONS**

	OTHER	THAN PLEDGES OR LOA	NS		
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 49	/51 Report: 52/78
2	FILER NAME	Flannigan, James (Mr.)	• •	3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; City; State; Zip Code 11608 Shoshone Austin, TX 78759		\$20.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 2901 Mill Reef Cv Austin, TX 78746		\$100.00	 
			·	<u></u>	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code 2509 Van Buren Houston, TX 77006		\$50.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/03/2014	Contributor address; City; State; Zip Code 5406 Balcones Dr Austin, TX 78731		\$150.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Service	ation / Job title (See Instructions)	Employer (See In Zenith Cafe Co		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; City; State; Zip Code PO Box 302710 Austin, TX 78703		\$350.00	† 
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In	structions)	
	Health Insura	nce Broker	Brooks Watson	Benefits	

						<u> </u>
	The Instruction	on Guide explains how to com	plete this form.		1 PAGE#	)/51 Report: 53/78
2	FILER NAME	Flannigan, James (Mr.)			3 ACCOUNT# 00629478	(Ethics Commission filers)
4	Date	5 Full name of contributor West, Clarence	out-of-state PAC (iD#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/12/2014	6 Contributor address; 4001 Lob Cv Austin, TX 78750	City; State; Zip Code		\$350.00	   
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	pation / Job title (See Instruction	ns)	10 Employer (See In Self-Employed	structions)	
	Date	Full name of contributor Whellan, Michael	☐ out-of-state PAC (ID#	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/25/2014	Contributor address; 4600 Laurel Canyon Dr Austin, TX 78731	City; State; Zip Code		\$50.00	!   
					(If travel outside of	Texas, complete Schedule T)
$\vdash$	Principal occup	L pation / Job title (See Instruction	is)	Employer (See In	<u> </u>	, <u> </u>
	Attorney			Graves Doughe	erty Hearon & Mod	ody
	Date	Full name of contributor Woss, Alison	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
:	11/17/2014	Contributor address; 14001 Avery Ranch Blvd Unit 203 Austin, TX 78717	City; State; Zip Code		\$100.00	 
	_		<del></del>		<u> </u>	Texas, complete Schedule T)
	Principal occup Marketing	eation / Job title (See Instruction	ns) 	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor Wright, Colin	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; 324 Ardmore Ct NW Atlanta, GA 30309	City; State; Zip Code		\$200.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Technology D	eation / Job title (See Instruction Director	ns)	Employer (See In McKesson	structions)	
	Date	Full name of contributor Zeller, Charles	☐ out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; 811 N Tumbleweed Trl Austin, TX 78733	City; State; Zip Code		\$100.00	] 
					(If travel outside of	Texas, complete Schedule T)
$\vdash$	Principal occup	Leation / Job title (See Instruction	ns)	Employer (See In	<u> </u>	
	•	•		-		

# **POLITICAL CONTRIBUTIONS**

	OTHER THAN PLEDGES OR LOANS			
	The Instruction	ON GUIDE explains how to complete this form.	1 PAGE # Schedule: 51/51 Report: 54/78	
2	FILER NAME	Flannigan, James (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00629478
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Zigrossi, Pat	<u>*</u> )	7 Amount of   8 In-kind contribution contribution (\$)   description (if applicable)
	11/09/2014			\$150.00   
				(If travel outside of Texas, complete Schedule T)
9	Principal occup N/A	pation / Job title (See Instructions)	10 Employer (See In: None	

				EXPEND	ITURE CATEGO	RIES		
Advertising Expe			ense				nt/Reimbursement	
Accounting/Bank Consulting Exper			services leverage Expense		Travel In District	ing Expense		Equipment & Related Expense onations Made By
Event Expense		Polling	Expense		Travel Out Of Distric			fficeholder/Political Committee
Fees		Printing	JExpense The INST	PUCTION GUI	Office Overhead/Rer	complete this for		a category not listed above)
. DAGE#			1			o complete tino tori	-	3 ACCOUNT # (TEC filers)
1 PAGE#			2 FILER NAM Flannigan,		• )			
Schedule: 1/22 R	<del>-</del>		1	Janes (IVI	.,			00629478
4 Date 5 Payee name								
11/12/2014		American P	rinting and Mail	ing	·			
6 Amount (\$)	7	Payee addres	ss City	r; State; :	Zip Code			
\$2,736.56	l	1606 Heady						
<b>, , ,</b>	l	Austin, TX	78754					
	l							
8	(a	Category (Se	ee Categories listed	at the top of t	his schedule)			of Texas, complete Schedule T)
PURPOSE		Printing Exp	ense					c hammers to add to road
OF EXPENDITURE	l					and yard sign	S	
EXPERIENCE	l					Check if Austin,	TX. officeholde	r living expense
9 Complete ONLY if	Н	Candidate / C	Officeholder name	· · · · · ·		Office soug		Office held:
direct expenditure						_		
to benefit C/OH							_	
Date		Payee name						
11/26/2014	l	American P	rinting and Mail	ing				
Amount (\$)	Г	Payee addres	ss City	; State;	Zip Code			<del>-</del>
\$1,496.06		1606 Heady	wav Circle					
ψ1,400.00	ŀ	Austin, TX	78754					
	1							
		Category (Se	ee Categories listed	at the top of t	his schedule)	Description (	If travel outside of	of Texas, complete Schedule T)
PURPOSE	ļ	Printing Exp	-	•	•	Push Cards		
OF	]							
EXPENDITURE						Check if Austin,	TX. officeholde	r living expense
Complete ONLY if	$\vdash$	Candidate / C	Officeholder name	<u> </u>		Office soug		Office held:
direct expenditure						•		
to benefit C/OH						<u> </u>		<del> </del>
Date		Payee name				-		
11/30/2014	l	Austin's Piza	za					
Amount (\$)	Г	Payee addres	ss City	; State;	Zip Code			
\$50.00	l	10900 Rese	earch Blvd					
Ψ50.00	l	Austin, TX	78759					
	<u> </u>	Category (Se	se Categories listed	at the top of the	his schedule)	Description (	If travel outside o	of Texas, complete Schedule T)
PURPOSE		Food/Bever	age Expense			food for volun	teers	_
OF EXPENDITURE			•					
EXPENDITORE						Check if Austin,	TX. officeholde	r living expense
Complete ONLY if	T	Candidate / C	Officeholder name	•		Office soug		Office held:
direct expenditure						_		
to benefit C/OH	L							
Date		Payee name						
12/05/2014		Bouldin Cre	ek Cafe					
Amount (\$)		Payee addres	ss City	r; State;	Zip Code			
\$41.85		1900 S 1st 8						
Ţ <b>30</b>		Austin, TX	78704					
		Category (Se	ee Categories listed	at the top of the	his schedule)	Description (	If travel outside of	of Texas, complete Schedule T)
PURPOSE		• • •	age Expense	•	•	food for staff i	meeting	_
OF EXPENDITURE			-					
EVLEUDIIOKE						Check if Austin,	TX. officeholde	r living expense
Complete ONLY if	T	Candidate / C	Officeholder name	·		Office soug		Office held:
direct expenditure						<b></b>		
to benefit C/OH	ı							

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees	Polling Expense I ravel Out Or Dis Printing Expense Office Overhead/ The INSTRUCTION GUIDE explains hov	Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 2/22 R	Floorings James (Mr.)	00629478
4 Date	5 Payee name	
11/21/2014	CheckMark Typesetting	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$2,315.68	3217 N IH 35	
, , , , , , , , ,	Austin, TX 78722	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) [_] road signs and yard signs
OF	Printing Expense	Toda digital and year digital
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		·
-		
Date 11/17/2014	Payee name Christensen, Elizabeth	
Amount (\$)	Payee address City; State; Zip Code	
\$180.00	PO Box 1792	
\$100.00	Austin, TX 78767	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE :	Salaries/Wages/Contract Labor	canvassing nov 1 - 15
EXPENDITURE		
Complete CMI V is	Candidate / Officeholder name	Office sought: Office held:
Complete ONLY if direct expenditure	Candidate / Chicerolder hame	Office sought.
to benefit C/OH		
Date	Payee name	
11/30/2014	Christensen, Elizabeth	
Amount (\$)	Payee address City; State; Zip Code	
\$300.00	PO Box 1792 Austin, TX 78767	
	7,000,00	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	canvassing nov 15 - 30
EXPENDITURE		_
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/03/2014	Conans Pizza	
Amount (\$)	Payee address City; State; Zip Code	
\$100.00	603 W 29th St	
	Austin, TX 78705	
	Catagoni (San Catagoniae lietad at the tag of this pake dide)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	food for volunteers
OF EXPENDITURE	. ooa botolago Expolico	
CAPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

			·
Advertising Expe		Contract Labor Los	an Repayment/Reimbursement
Accounting/Bank			ensportation Equipment & Related Expense intributions/Donations Made By
Consulting Exper Event Expense	Polling Expense Travel Out Of Dis	trict	Candidate/Officeholder/Political Committee
Fees	Printing Expense Office Overhead/	•	HER (enter a category not listed above)
	The Instruction Guide explains hov	v to complete this form.	
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 3/22 R	teport: 57/78 Flannigan, James (Mr.)		00629478
4 Date	5 Payee name	<u> </u>	
11/10/2014	Cox Media Group		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$9.99	6205 Peachtree Dunwoody Rd Atlanta, GA 30328		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If tra	avel outside of Texas, complete Schedule T)
PURPOSE	Fees	subscription to A	ustin American-Statesman
OF EXPENDITURE			
EXPENDITORE		Check if Austin, TX.	officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure	Cartaldate / Citicational Harris	o	555,
to benefit C/OH			
Date	Pavee name		
11/28/2014	Craigslist		
Amount (\$)	Payee address City; State; Zip Code	<del></del>	
` '	•		
\$25.00	1381 9th Ave San Francisco. CA 94122		
	3aii i iaii0i3co, OA 94122		
		<u> </u>	
2112222	Category (See Categories listed at the top of this schedule)		avel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	job posting for ca	anvassers
OF	Advertising Expense	job posting for ca	anvasseis
	Advertising Expense		officeholder living expense
OF	Advertising Expense  Candidate / Officeholder name		
OF EXPENDITURE  Complete ONLY if direct expenditure		Check if Austin, TX,	officeholder living expense
OF EXPENDITURE Complete ONLY if		Check if Austin, TX,	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure		Check if Austin, TX,	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX,	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date  11/30/2014	Candidate / Officeholder name Payee name Davies, Will	Check if Austin, TX,	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$)	Candidate / Officeholder name  Payee name Davies, Will  Payee address  City; State; Zip Code	Check if Austin, TX,	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date  11/30/2014	Candidate / Officeholder name Payee name Davies, Will	Check if Austin, TX,	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$)	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A	Check if Austin, TX,	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$)	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751	Check if Austin, TX, Office sought:	officeholder living expense Office held:
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code  4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule)	Check if Austin, TX, Office sought:	officeholder living expense
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751	Check if Austin, TX, Office sought:	officeholder living expense Office held:
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code  4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule)	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code  4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule)	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$)	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook Payee address City; State; Zip Code 1601 Willow Road	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook Payee address City; State; Zip Code	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$)	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook Payee address City; State; Zip Code 1601 Willow Road	Description (If tra	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$)	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025	Description (if tra Nov canvassing  Check if Austin, TX, Office sought:	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)  officeholder living expense Office held:
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$)	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook  Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025  Category (See Categories listed at the top of this schedule)	Description (If transcription Check if Austin, TX, Office sought:  Description (If transcription Check if Austin, TX, Office sought:	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$) \$474.10	Payee name Davies, Will Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025	Description (If transcription Check if Austin, TX, Office sought:  Description (If transcription Check if Austin, TX, Office sought:	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)  officeholder living expense Office held:
Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$) \$474.10	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook  Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025  Category (See Categories listed at the top of this schedule)	Description (If translation, TX, Office sought:  Description (If translation, TX, Office sought:  Description (If translation, TX, Office sought:	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)  officeholder living expense Office held:  avel outside of Texas, complete Schedule T)
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$) \$474.10  PURPOSE OF EXPENDITURE	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook  Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025  Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If transport of the Check if Austin, TX, Office sought:  Description (If transport of the Check if Austin, TX, Office sought:  Description (If transport of the Check if Austin, TX, Office sought:	officeholder living expense  Office held:  avel outside of Texas, complete Schedule T)  officeholder living expense  Office held:  avel outside of Texas, complete Schedule T)  deo, and gotv ads  officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$330.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$) \$474.10	Candidate / Officeholder name  Payee name Davies, Will  Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Payee name Facebook  Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025  Category (See Categories listed at the top of this schedule)	Description (If translation, TX, Office sought:  Description (If translation, TX, Office sought:  Description (If translation, TX, Office sought:	officeholder living expense Office held:  avel outside of Texas, complete Schedule T)  officeholder living expense Office held:  avel outside of Texas, complete Schedule T)

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Services Solicitation/Funds	Contract Labor Loan Re raising Expense Transpo Contribu strict Candi Rental Expense OTHER	payment/Reimbursement rtation Equipment & Related Expense tions/Donations Made By date/Officeholder/Political Committee (enter a category not listed above)
1 PAGE# Schedule: 4/22 F	Report: 58/78 Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478
4 Date 11/30/2014	5 Payee name Facebook		·
6 Amount (\$) \$250.50	7 Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (if travel or runoff gotv ads and co	utside of Texas, complete Schedule T) losing statement video
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/26/2014	Payee name FedEx		
Amount (\$) \$4.76	Payee address City; State; Zip Code 13729 N Hwy 183 Austin, TX 78750		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	walk sheets	utside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, office Office sought:	eholder living expense Office held:
Date 10/27/2014	Payee name FedEx		
Amount (\$) \$2.26	Payee address City; State; Zip Code 13729 N Hwy 183 Austin, TX 78750		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	campaign finance rep	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, office Office sought:	eholder living expense Office held:
Date 10/30/2014	Payee name FedEx		
Amount (\$) \$9.26	Payee address City; State; Zip Code 13729 N Hwy 183 Austin, TX 78750		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	use of scanner	utside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	eholder living expense Office held:

Austin, Texas 78711-2070

#### **POLITICAL EXPENDITURES**

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/ The Instruction Guide explains hov	, , , , , , , , , , , , , , , , , , , ,
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 5/22 F	I =	00629478
4 Date	5 Payee name	
11/03/2014	FedEx	
6 Amount (\$)	7 Payee address City, State; Zip Code	
\$12.24	13729 N Hwy 183	
,	Austin, TX 78750	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) walk sheets
OF	Printing Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
11/09/2014	FedEx	
Amount (\$)	Payee address City; State; Zip Code	
\$10.84	1	
Ψ10.01	Austin, TX 78750	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)  walk sheets
OF	Printing Expense	Agiv succis
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		-··· <b>y</b> ·
Date	Payee name FedEx	
11/13/2014 Amount (\$)	Payee address City; State; Zip Code	
\$6.78	1	
<b>Φ</b> 0.70	Austin, TX 78750	
21122005	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) walk sheets
PURPOSE OF	Printing Expense	waik sneets
EXPENDITURE		The same of the sa
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense  Office sought: Office held:
direct expenditure	Salididate i Silisonidas name	·
to benefit C/OH		
Date	Payee name FedEx	
11/15/2014 Amount (\$)		
	I	
\$17.17	Austin, TX 78750	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	walk sheets
EXPENDITURE	1	
	2 21 100 111	Check if Austin, TX, officeholder tiving expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
PAGE#

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made 8y

Event Expense Fees		d/Rental Expense OTHER (enter a category not listed above)
	The Instruction Guide explains he	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 6/22 F	eport: 60/78 Flannigan, James (Mr.)	00629478
4 Date	5 Payee name	
11/15/2014	FedEx	<u>-</u>
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$5.59	13729 N Hwy 183	
	Austin, TX 78750	
	(-1.0-1	(b) Description (figure) subject Towns consists Cabadula Ti
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule 1) walk sheets
OF	Trinking Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
	Pauco como	
Date 11/28/2014	Payee name FedEx	
Amount (\$)	Payee address City, State, Zip Code	<del></del>
\$6.46	13729 N Hwy 183	
₩0. <del>4</del> 0	Austin, TX 78750	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	paper cutting services
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	**************************************
11/29/2014	FedEx	
Amount (\$)	Payee address City; State; Zip Code	
\$3.23	3300 Bee Caves Rd	
	Austin, TX 78746	
	Category (See Categories listed at the tag of this cahedula)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	paper cutting services
OF EXPENDITURE	, many expenses	
EXPERDITORE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/04/2014	FedEx	
Amount (\$)	Payee address City; State; Zip Code	·
\$4.58	13729 N Hwy 183	
\$1,50	Austin, TX 78750	
BURDOSS	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	paper cutting services
EXPENDITURE		
Complete Chill V V	Candidate / Officehalder name	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

P.O.Box 12070

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	I/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 7/22 F	P1 :	00629478
4 Date	5 Payee name	00020410
12/05/2014	FedEx	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$4.58	600 E Ben White Blvd	
ψ4.50	Austin, TX 78704	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	paper cutting services
EXPENDITURE		
	04:4 / 0601-14	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
12/06/2014	FedEx	
Amount (\$)	Payee address City; State; Zip Code	
\$62.77	13729 N Hwy 183	
	Austin, TX 78750	
		1 Consider the contract of the
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) voting info quarter pages and paper cutting services
OF	Printing Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name Google, Inc.	
10/29/2014 Amount (\$)	Payee address City; State; Zip Code	<u> </u>
. ,	1600 Amphitheatre Parkway	
\$350.00	Mountain View, CA 94043	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	endorsement and gotv ads
EXPENDITURE		
	On Aliday / Office halders	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/28/2014	Google, Inc.	
Amount (\$)	Payee address City; State; Zip Code	
\$265.41	1600 Amphitheatre Parkway	
	Mountain View, CA 94043	
	Cologon /Con Cologonia Batalanta ta at the annual to	Description (lifetonal autoide of Torres accordate Calculus TV TV
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)  runoff gotv ads and closing statement video
OF	natoriality Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		·
to solion oloil		•

Schedule: 8/22 Report: 62/78 Flannigan, James (Mr.) 00629478  4 Date			
Accounting farming Expense Food Pressure Foo		EXPENDITURE CATE	GORIES
Consultarior Exposure Finds Express Finds Express Finds Express Finds Express Finds Express The listraction of Quote explains how to complete this form.  1 PAGE # Schedules R72 Report 6278 1		ense Gifts/Awards/Memorial Expense Salaries/Wages/	Contract Labor Loan Repayment/Reimbursement
Pierwing Expense The Instruction Guide explains how to complete this form.  1 PAGE # Steedule: 9/22 Report 62/78 4 Date 11/07/2014 HE B 6 Amount (5) 7 Payer address City; State; Zip Code 11/07/2014 HE B 6 Amount (5) 8 PURPOSE 6 POSE PERDITURE  1 Candidate / Officeholder name Complete ONLY # State Categories listed at the top of this schedule) Complete ONLY # Haute, Margaret  Amount (5) 8 Payer address City; State; Zip Code Check if Austin, TX, officeholder riving expense  Complete ONLY # State Categories listed at the top of this schedule) Complete ONLY # Candidate / Officeholder name  Complete ONLY # Haute, Margaret  Complete ONLY # Haute, Margaret  Amount (5) 8 Payer address City; State; Zip Code Category (See Categories listed at the top of this schedule) Complete ONLY # Haute, Margaret  Complete ONLY # Haute, Margaret  Complete ONLY # Haute, Margaret  Haute, Margaret  Amount (5) 8 Payer address City; State; Zip Code Candidate / Officeholder name  Office sought:  Candidate / Officeholder name  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living exp	Consulting Exper	nse Food/Beverage Expense Travel In District	Contributions/Donations Made By
PAGE   Schedule 8/22 Report 62/78   Z FILER NAME Flannigan, James (Mr.)   00629478   0			
Schedule: 8/22   Report: 6/278   Flannigan, James (Mr.)   0.0629478		The Instruction Guide explains ho	w to complete this form.
4 Date 11/07/2014 5 Payee name 12.5 Name 12.5	1 PAGE#		<del>-</del>
11/07/2014 H.E.B. 6 Amount (\$)	Schedule: 8/22 R	leport: 62/78 Flannigan, James (Mr.)	00629478
\$ Amount (8) 7 Payes address City: State: Zip Code 1521 N FM 520 Austin. TX 76750  8 PURPOSE OF EXPENDITURE  9 Corrected NULY of Secretary (See Categories listed at the top of this schedule)   (b) Description (If travel outside of Texas, complete Schedule T)   Dottled water for field and volunteers	4 Date	17 '	
\$8.74    Austin, TX 78750   Austin, TX 78750		7.1.2.2	
Austin, TX 78750    Purpose   Calegory (See Categories listed at the top of this schedule)   Candidate of Texas, complete Schedule Time of the schedule time	, ,	1, ,	
PURPOSE EXPENDITURE   (a) Category (See Categories listed at the top of this schedule)   (b) Description (if travel outside of Texas, complete Schedule T)   Dottled Watter for field and volunteers   Check if Austin, TX, officeholder living expense   Chick if Austin, TX, officeholder living expense   Category (See Categories listed at the top of this schedule)   Canyassing oct 16 - nov 4   Check if Austin, TX, officeholder living expense   Chick if Austin, TX,	\$8.74		
PURPOSE OF EXPENDITURE    Complete ONLY of   Condidate / Officeholder name		Adding the following the first terms of the first t	
PURPOSE OF EXPENDITURE    Complete ONLY of   Condidate / Officeholder name	8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
Candidate / Officeholder name	PURPOSE	* * · · · · = · * · ·	bottled water for field and volunteers
9 Complete ONLY of direct expenditure to benefit COH  Date 11/06/2014			<u> </u> _
Date			
Date 11/06/2014 Haule, Margaret 11/06/2014 Haule, Margaret 11/06/2014 Haule, Margaret 11/06/2014 Austin, TX 78716  PURPOSE OF EXPENDITURE  Complete ONLY 1 Haule, Margaret 1 Haule, Margaret 2 Candidate / Officeholder name 3 City: State: Zip Code PO Box 163014 Austin, TX, officeholder living expanse 3 City: State: Zip Code Pose officeholder living expanse 3 City: State: Zip Code PO Box 163014 Austin, TX, officeholder living expanse 3 City: State: Zip Code PO Box 163014 Austin, TX 78716  PURPOSE OF EXPENDITURE  Complete ONLY 1 Haule, Margaret 3 City: State: Zip Code PO Box 163014 Austin, TX 78716  PURPOSE OF EXPENDITURE  Complete ONLY 2 Cardidate / Officeholder name 3 City: State: Zip Code PO Box 163014 Austin, TX 78716  Complete ONLY 3 Cardidate / Officeholder name 3 City: State: Zip Code PO Box 163014 Austin, TX 78716  PURPOSE OF EXPENDITURE  Complete ONLY 3 Candidate / Officeholder name 3 City: State: Zip Code PO Box 163014 Austin, TX 78716  Date 10/31/2014 Payee name 10/31/2014 Heinrich, Allison Payee address City: State: Zip Code PO Box 162004 Payee address City: State: Zip Code Pose State S		Candidate / Officeholder name	Office sought: Office held:
Haule, Margaret   Payee address   City: State: Zip Code			
Amount (\$) \$520.00 Payee address City: State: Zip Code PO Box 163014 Austin, TX 78716  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure to benefit COH  Date 11/23/2014 Payee name Haule, Margaret Haule, Margaret Po Box 163014 Austin, TX 78716  PURPOSE OF EXPENDITURE  Carngleto ONLY if direct expenditure to benefit COH  Date 11/23/2014 Payee name Haule, Margaret Haule, Margaret Po Box 163014 Austin, TX 78716  Category (See Categories listed at the top of this schedule) Description (if travel outside of Texas, complete Schedule T) Candidate / Office held:  Carngleto ONLY if direct expenditure to benefit COH  Date Payee name Poyee name Office sought: Office held:  Date Pose For Expenditure Carngleto ONLY if direct expenditure to benefit COH  Date Payee name Poyee name Office sought: Office held:  Carngleto ONLY if Date Payee name Poyee address City: State: Zip Code Pose Sought: Office held:  Date Payee name Poyee name Office sought: Office held:  Date Payee name Poyee name Office sought: Office held:  Carngleto ONLY if Carngleto ONLY if Date Note Payee name Poyee address City: State: Zip Code Poyee name Office sought: Office held:  Date Payee name Poyee name Office sought: Office held:  Carngleto ONLY if Car	Date	Payee name	
PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Complete ONLY of ceresponditure  Complete ONLY of complete ONLY officeholder name  Complete ONLY officeholder	11/06/2014	Haule, Margaret	
Austin, TX 78716  PURPOSE OF EXPENDITURE  Caregory (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Camplete ONLY if direct expenditure to benefit C/OH  PURPOSE OF EXPENDITURE  Candidate / Office holder name  Candidate / Office holder name  Candidate / Office holder name  Office sought:  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Office sought:  Candidate / Officeholder name  Office sought:  Candidate / Officeholder name  Office sought:  Office hold:  Candidate / Officeholder name  Office sought:  Office sought:  Office hold:  Candidate / Officeholder name  Office sought:  Office hold:  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Office sought:  Office hold:  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Office sought:  Office hold:  Office hold:  Office hold:	Amount (\$)	Payee address City; State; Zip Code	
PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Camplete ONLY if direct expenditure to benefit C/OH  Date 11/23/2014 Amount (S) 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) Check if Austin, TX, officeholder living expense  Office sought: Office held:  Office held:	\$520.00		
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/23/2014  Amount (\$) PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Date 11/23/2014  Austin, TX, 78716  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Date 10/31/2014  Amount (\$) Purpose OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Office sought:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Description (if travel outside of Texas complete Schedule T)  Campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought:  Office held:		Austin, 1X 787 10	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/23/2014  Amount (\$) PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Date 11/23/2014  Austin, TX, 78716  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Date 10/31/2014  Amount (\$) Purpose OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Office sought:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Description Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Description (if travel outside of Texas complete Schedule T)  Campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought:  Office held:	<del></del>	Catogory (Can Catagorina listed at the tan of this schools)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY of direct expenditure to benefit C/OH  Date 11/23/2014	PURPOSE		canvassing oct 16 - nov 4
Complete ONLY if direct expenditure to benefit C/OH  Date 11/23/2014		Julianos riagos com ascendo	
direct expenditure to benefit C/OH  Date 11/23/2014	EXPENDITORE		Check if Austin, TX, officeholder living expense
Date 11/23/2014		Candidate / Officeholder name	Office sought: Office held:
Haule, Margaret			
Amount (\$) Payee address City; State; Zip Code \$105.00 PO Box 163014 Austin, TX 78716  PURPOSE OF Salaries/Wages/Contract Labor  Complete ONLY if Payee address City; State; Zip Code  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Candidate / Officeholder name  Candidate / Officeholder name  Office sought:  Candidate / Officeholder name  Office sought:  Office held:  Date 10/31/2014  Amount (\$) Payee name Heinrich, Allison  Payee address City; State; Zip Code  \$1,250.00 #21102  Austin, TX 78726  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Complete ONLY if Candidate / Officeholder name  Office sought:  Office held:  Check if Austin, TX, officeholder living expense  Office held:	Date	Payee name	<del>-</del>
\$105.00 PO Box 163014 Austin, TX 78716  PURPOSE OF Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  Date 10/31/2014  Amount (\$) Payee address City; State; Zip Code #21100  \$81,250.00  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Description (if travel outside of Texas, complete Schedule T) Candidate / Office held:  Complete ONLY if direct expenditure  to benefit C/OH  Date 10/31/2014  Amount (\$) Payee name Heinrich, Allison  Purpose OF Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought: Office held:	11/23/2014	Haule, Margaret	
Austin, TX 78716  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Office sought:  Office held:  Candidate / Officeholder name  Payee name  Heinrich, Allison  Payee address  City: State: Zip Code  \$1,250.00  \$807 N FM 620  \$21102  Austin, TX 78726   Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if Austin, TX, officeholder living expense  Check if Austin, TX, officeholder living expense  Office sought:  Office held:	Amount (\$)	Payee address City; State; Zip Code	
PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014  Amount (\$) \$1,250.00  \$1,250.00  PURPOSE OF EXPENDITURE  Candidate / Officeholder tiving expense  City: State: Zip Code  #21102 #21102 #21102 #21102 #21102 #21102 Austin, TX 78726  Category (See Categories listed at the top of this schedule)  Candidate / Officeholder name  Description (If travel outside of Texas, complete Schedule T)  Description (If travel outside of Texas, complete Schedule T)  Description (If travel outside of Texas, complete Schedule T)  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if Austin, TX, officeholder living expense  Office sought:  Office held:	\$105.00		
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date Payee name Heinrich, Allison  Amount (\$) Payee address City; State; Zip Code #21102 Austin, TX 78726  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought: Office held:  Check if Austin, TX, officeholder living expense  Office sought: Office held:  Date Payee name Heinrich, Allison  Amount (\$) Payee address City; State; Zip Code  #21102 Austin, TX 78726  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Candidate / Officeholder name  Office sought: Officeholder living expense  Office sought: Office held:		Austin, IX 78716	
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date Payee name Heinrich, Allison  Amount (\$) Payee address City; State; Zip Code #21102 Austin, TX 78726  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Canvassing - nov 10  Check if Austin, TX, officeholder living expense  Office sought: Office held:  Check if Austin, TX, officeholder living expense  Office sought: Office held:  Date Payee name Heinrich, Allison  Amount (\$) Payee address City; State; Zip Code  #21102 Austin, TX 78726  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Candidate / Officeholder name  Office sought: Officeholder living expense  Office sought: Office held:		Colores (O. Colores de Calendario)	Description ((face of autoide of Taura consists Sabadula T)
Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014 Payee name Heinrich, Allison  Amount (\$) Payee address City: State: Zip Code \$\frac{4}{2}\$ \$\frac{4}{	PURPOSE		
Complete ONLY if direct expenditure to benefit C/OH  Date 10/31/2014 Payee name Heinrich, Allison  Amount (\$) Payee address City; State; Zip Code \$1,250.00 \$9807 N FM 620 #21102 Austin, TX 78726  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Check if Austin, TX, officeholder living expense  Office sought:  Office held:  Office held:  Check if Austin, TX, officeholder living expense  Office held:  Check if Austin, TX, officeholder living expense  Office held:			
Date	EXPENDITORE		Check if Austin, TX, officeholder living expense
Date		Candidate / Officeholder name	Office sought: Office held:
Amount (\$) Payee address City; State; Zip Code \$1,250.00 \$9807 N FM 620 #21102 Austin, TX 78726  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Pige address City; State; Zip Code  Description (If travel outside of Texas, complete Schedule T) campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought: Office held:			
Amount (\$) Payee address City; State; Zip Code  \$1,250.00 9807 N FM 620 #21102 Austin, TX 78726  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  Candidate / Officeholder name  City; State; Zip Code  Description (If travel outside of Texas, complete Schedule T) campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought: Office held:	Date	Payee name	
\$1,250.00  \$807 N FM 620 #21102 Austin, TX 78726  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  \$1,250.00  \$807 N FM 620 #21102 Austin, TX 78726  Description (If travel outside of Texas, complete Schedule T) campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought: Office held:	10/31/2014	Heinrich, Allison	
#21102 Austin, TX 78726  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  #21102 Austin, TX 78726  Description (If travel outside of Texas, complete Schedule T) campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought: Office held:	Amount (\$)	Payee address City; State; Zip Code	,
#21102 Austin, TX 78726  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  #21102 Austin, TX 78726  Description (If travel outside of Texas, complete Schedule T) campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought: Office held:	\$1,250.00		
PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Campaign management oct 1 - 15  Check if Austin, TX, officeholder living expense  Office sought: Office held:	. ,	#21102	
PURPOSE OF Salaries/Wages/Contract Labor campaign management oct 1 - 15  EXPENDITURE  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure			
Complete ONLY if direct expenditure  Complete Condidate / Officeholder name  Complete Condidate / Officeholder name  Office sought:  Office held:	PURPOSE	•	
Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Check if Austin, TX, officeholder living expense  Office sought: Office held:	OF	Salaries/vvages/Contract Labor	
Complete ONLY if direct expenditure Office holder name Office sought: Office held:	EXPENDITURE		Check if Austin, TX officeholder living expense
	Complete ONLY if	Candidate / Officeholder name	

#### P.O.Box 12070 Austin, Texas 78711-2070

### **POLITICAL EXPENDITURES**

		·
-	EXPENDITURE (	CATEGORIES
Advertising Expe Accounting/Bank		Wages/Contract Labor Loan Repayment/Reimbursement on/Fundraising Expense Transportation Equipment & Related Expense
Consulting Exper	nse Food/Beverage Expense Travel In	
Event Expense Fees	Printing Expense Office Ov	verhead/Rental Expense OTHER (enter a category not listed above)
		ins how to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 9/22 R		00629478
4 Date 11/06/2014	5 Payee name Heinrich, Allison	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$1,250.00	9807 N FM 620 #21102 Austin, TX 78726	
8	(a) Category (See Categories listed at the top of this schedu	le) (b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	campaign management oct 16 - 31
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	<u> </u>
11/26/2014	Heinrich, Allison	
Amount (\$)	Payee address City; State; Zip Code	
\$1,250.00	9807 N FM 620	
,	#21102   Austin, TX 78726	
PURPOSE	Category (See Categories listed at the top of this schedu	le) Description (If travel outside of Texas, complete Schedule T) campaign management nov 1 - nov 15
OF	Salaries/Wages/Contract Labor	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
11/24/2014	Home Depot	
Amount (\$)	Payee address City; State; Zip Code	
\$12.18	<u>_</u> , .	
<b>\$12.10</b>	Austin, TX 78717	
PURPOSE	Category (See Categories listed at the top of this schedu	le) Description (If travel outside of Texas, complete Schedule T) zip ties for road signs
OF	Advertising Expense	2.5 (60 10) 1000 019110
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
11/22/2014	Hot Breads	
Amount (\$)	Payee address City; State; Zip Code	·
\$47.44	7318 McNeil Dr	
ψ <del>4</del> 7, <del>44</del>	Ste 102	
	Austin, TX 78729	<u></u>
D. 10000	Category (See Categories listed at the top of this schedu	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Food/Beverage Expense	food for volunteers
EXPENDITURE		
Complete ONLY 2	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Onicendide Hame	Onice sought. Onice field.

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

P.O.Box 12070

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling Expense Travel Out Of D Printing Expense Office Overhead	histrict Candidate/Officeholder/Political Committee d/Rental Expense OTHER (enter a category not listed above)
	The Instruction Guide explains he	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 10/22	Report: 64/78 Flannigan, James (Mr.)	00629478
4 Date	5 Payee name	
11/09/2014	Kerbey Lane Cafe	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$61.69	13435 Hwy 183 Ste 415	
	Austin, TX 78704	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Food/Beverage Expense	food for campaign meeting
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/18/2014	Kerbey Lane Cafe	
Amount (\$)	Payee address City; State; Zip Code	
\$34.00	13435 Hwy 183	
	Ste 415 Austin, TX 78704	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Food/Beverage Expense	food for campaign meeting
OF EXPENDITURE	, ddd, dd dd dd dd dd dd dd dd dd dd dd	
EXPENDITORE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/01/2014	Kerbey Lane Cafe	
Amount (\$)	Payee address City; State; Zip Code	
\$29.50	13435 Hwy 183	
·	Ste 415 Austin, TX 78704	
· ·	,	Description (If travel outside of Tayer consists Schoolide TV
PURPOSE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) food for campaign meeting
OF EXPENDITURE	1 ood Bottorago Exporto	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	<del></del> -
12/04/2014	LAZ Parking	
Amount (\$)	Payee address City; State; Zip Code	
\$10.00	101 W 6th St	
	Austin, TX 78701	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) parking for event
OF	Event Expense	panning for oronic
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		<u>-</u>

Advertising Expe	EXPENDITURE CA	TEGORIES ges/Contract Labor Loan Repayment/Reimbursement
Accounting/Bank	ing Legal Services Solicitation/F	undraising Expense Transportation Equipment & Related Expense
Consulting Exper Event Expense	nse Food/Beverage Expense Travel In Dis Polling Expense Travel Out C	
Fees		nead/Rental Expense OTHER (enter a category not listed above)
	The Instruction Guide explains	how to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 11/22	Flanciana James (Ma.)	00629478
4 Date	5 Payee name	
11/24/2014	M & G Sign Placement Services	
6 Amount (\$)	7 Payee address City; State; Zip Code	
,,,	[	
\$1,440.00	Austin. TX 78741	
_	(A) Catagon (O Ostorodo Saturda da Maria de Asia da Asia	(b) Description (If travel outside of Texas, complete Schedule T)
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	road sign installation
OF	Salaries/Wages/Contract Labor	,
EXPENDITURE		n
	One-Middle LOffice helder a see	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/07/2014	Madam Mam's	
Amount (\$)	Payee address City; State; Zip Code	
` '	l	
\$25.00	2514 Guadalupe St Austin, TX 78705	
	Austin, FA 70700	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) food for staff meeting
OF	Food/Beverage Expense	lood for staff freeting
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/16/2014	Medley, Blake	
Amount (\$)	Payee address City; State; Zip Code	<del>-</del> -
***		
\$270.00	2817 Salado St Austin, TX 78705	
	1.003, 17.7.0	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	canvassing nov 1 - nov 15
OF	Galanes/ Wages/ Contract Labor	
EXPENDITURE		Charle if Austin TV officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense  Office sought: Office held:
direct expenditure	Obligate / Officeriologi flume	Omoc sosynt.
to benefit C/OH		
Date	Payee name	
12/04/2014	Medley, Blake	
Amount (\$)	Payee address City; State; Zip Code	*
\$168.00	2817 Salado St	
\$ 100.00	Austin, TX 78705	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	canvassing Nov 16 - 30
OF	Tolarian Liadani adililadi maga	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Samuello Cintollorio India	Cinid field.

Advertising Expe	EXPENDITURE CATE  nse Gifts/Awards/Memorial Expense Salaries/Wages/	Contract Labor Loan Repayment/Reimbursement
Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fund	Contributions/Donations Made By strict Candidate/Officeholder/Political Committee (Rental Expense OTHER (enter a category not listed above)
1 PAGE# Schedule: 12/22	Report: 66/78 Flannigan, James (Mr.)	3 ACCOUNT # (TEC filers) 00629478
4 Date	5 Payee name	•
12/02/2014	Murillo, Blanca 7 Pavee address City: State: Zip Code	
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 1515 Wickersham Ln Apt 213 Austin, TX 78741	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Fundraising Assistance
OF EXPENDITURE	Salanes/Wages/Contract Labor	
EXPENDITORE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/21/2014	Payee name NationBuilder	
Amount (\$)	Payee address City; State; Zip Code	
\$87.00	448 S Hill St #200 Los Angeles, CA 90013	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Website - November
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/28/2014	Office Depot	
Amount (\$)	Payee address City; State; Zip Code	
\$42.52	4501 West Braker Lane Austin, TX 78759	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) printer ink and paper
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/17/2014	Office Depot	
Amount (\$)	Payee address City; State; Zip Code	
\$68.80	2101 S Lamar Austin, TX 78704	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) paper, clipboards, labels
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

#### Austin, Texas 78711-2070

#### **POLITICAL EXPENDITURES**

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

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

Event Expense Fees	Polling Expense Travel Out Of Dis Printing Expense Office Overhead/	
	The Instruction Guide explains how	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 13/22	Report: 67/78 Flannigan, James (Mr.)	00629478
4 Date	5 Payee name	
11/28/2014	Office Depot	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$139.62	2101 S Lamar Austin, TX 78704	
	Austin, 1X 76704	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
8 PURPOSE	Office Overhead/Rental Expense	rubberbands, toner
OF EXPENDITURE	Stilles Storilled Stiller Experies	
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
	- Cause some	
Date 12/01/2014	Payee name Office Depot	
Amount (\$)	Payee address City; State; Zip Code	<del></del>
` '	4501 West Braker Lane	
\$41.21	Austin, TX 78759	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	paper, pens
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/07/2014	Office Max	
Amount (\$)	Payee address City; State; Zip Code	
\$128.53	4615 N Lamar	
	Austin, TX 78751	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	paper, ink, binder clips, pens, mounting tape
OF EXPENDITURE	Cingo Overnouar tantal Expenses	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
11/11/2014	Office Max	
Amount (\$)	Payee address City, State, Zip Code	
\$5.41	4615 N Lamar	
Ψ0.41	Austin, TX 78751	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	paper
EXPENDITURE		
	Condidate / Office holder as ==	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		<u></u>

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

### **POLITICAL EXPENDITURES**

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services ise Food/Beverage Expense Polling Expense Printing Expense	DITURE CATEGO Salaries/Wages/Con Solicitation/Fundrais Travel In District Travel Out Of Distric Office Overhead/Rer iunc explains how to	tract Labor ing Expense t ntal Expense	Transportation E Contributions/Do Candidate/Of OTHER (enter a	nt/Reimbursement Equipment & Related Expense onations Made By fficeholder/Political Committee a category not listed above)
1 PAGE# Schedule: 14/22	2 FILER NAME Report: 68/78 Flannigan, James (N	vir.)			3 ACCOUNT # (TEC filers) 00629478
4 Date	5 Payee name				<del></del>
11/26/2014	Salathe, Douglas	7in Codo			<u> </u>
6 Amount (\$) \$1,750.00	7 Payee address City; State; 9101 Japonica Ct B Austin, TX 78748	Zip Code			
8 PURPOSE	(a) Category (See Categories listed at the top of Salaries/Wages/Contract Labor	f this schedule)	(b) Description ( field director s		of Texas, complete Schedule T)
OF EXPENDITURE			Check if Austin,	TY officeholde	r living avgance
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug		Office held:
Date	Payee name				_
11/16/2014	Siever, Michael	7:- 0-4-			<u>-</u>
Amount (\$) \$312.00	Payee address City; State; 9508 Meadowheath Austin, TX 78729	Zip Code			
PURPOSE OF	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	f this schedule)	Description ( canvassing N		of Texas, complete Schedule T)
EXPENDITURE			Check if Austin,	TX, officeholde	r living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug		Office held:
Date 11/30/2014	Payee name Siever, Michael				<del>-</del>
Amount (\$)	Payee address City; State;	Zip Code			
\$654.00	9508 Meadowheath Austin, TX 78729				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	f this schedule)	Description ( canvassing no		of Texas, complete Schedule T)
EXPENDITORE			Check if Austin,	TX, officeholde	r living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	<u></u>	Office soug	ht:	Office held:
Date 11/30/2014	Payee name Spears, Eric	-			
Amount (\$)	Payee address City; State;	Zip Code			
\$348.00	11825 Lansdowne Rd Austin, TX 78754				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	f this schedule)	Description ( canvassing fo		of Texas, complete Schedule T)
			Check if Austin,		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht:	Office held:

#### Austin, Texas 78711-2070

### **POLITICAL EXPENDITURES**

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

**EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Consulting Exper Event Expense Fees	Polling Expense Travel Office Ov	District Contributions/Donations Made By t Of District Candidate/Officeholder/Political Committee erhead/Rental Expense OTHER (enter a category not listed above) ns how to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 15/22	- Floreines James (Bis)	00629478
4 Date	5 Payee name	
11/02/2014	Starbucks	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$3.90	13450 Research Blvd Austin, TX 78750	
8	(a) Category (See Categories listed at the top of this schedu	e) (b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Food/Beverage Expense	coffee for volunteers
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
<b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name Starbucks	-
11/03/2014		
Amount (\$)	Payee address City; State; Zip Code	
\$26.25	504 W 24th Sr Austin, TX 78705	
	Addin, 12 roros	
	Cotogon (Co. Cotogon C	Description (If travel putride of Tayon complete Schoolule T)
PURPOSE	Category (See Categories listed at the top of this schedu Food/Beverage Expense	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers
OF	Fuod/beverage Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
disease evene additives		
direct expenditure		•
to benefit C/OH		
to benefit C/OH Date	Payee name	<del>-</del>
to benefit C/OH	Starbucks	
to benefit C/OH Date		
to benefit C/OH  Date  11/03/2014	Starbucks  Payee address  City; State; Zip Code 13450 Research Blvd	
to benefit C/OH  Date 11/03/2014  Amount (\$)	Starbucks  Payee address  City; State; Zip Code	
to benefit C/OH  Date 11/03/2014  Amount (\$)	Starbucks  Payee address  City; State; Zip Code 13450 Research Blvd	
to benefit C/OH  Date 11/03/2014  Amount (\$)  \$5.14	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedu	e) Description (If travel outside of Texas, complete Schedule T)
to benefit C/OH  Date 11/03/2014  Amount (\$)  \$5.14	Starbucks Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750	
to benefit C/OH  Date 11/03/2014  Amount (\$)  \$5.14	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedu	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers
to benefit C/OH  Date 11/03/2014  Amount (\$) \$5.14  PURPOSE OF EXPENDITURE	Starbucks Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
to benefit C/OH  Date 11/03/2014  Amount (\$) \$5.14  PURPOSE OF EXPENDITURE	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedu	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers
to benefit C/OH  Date 11/03/2014  Amount (\$) \$5.14  PURPOSE OF EXPENDITURE	Starbucks Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
to benefit C/OH  Date 11/03/2014  Amount (\$)  \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure	Starbucks Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedu Food/Beverage Expense  Candidate / Officeholder name	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
to benefit C/OH  Date 11/03/2014  Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date	Starbucks Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/05/2014	Starbucks Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH Date 11/05/2014 Amount (\$)	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/05/2014	Starbucks Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH Date 11/05/2014 Amount (\$)	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code 504 W 24th Sr	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH Date 11/05/2014 Amount (\$)	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code 504 W 24th Sr Austin, TX 78705	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH Date 11/05/2014 Amount (\$)	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code 504 W 24th Sr Austin, TX 78705  Category (See Categories listed at the top of this schedule)	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/05/2014 Amount (\$) \$11.15	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code 504 W 24th Sr Austin, TX 78705	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH Date 11/05/2014 Amount (\$) \$11.15	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code 504 W 24th Sr Austin, TX 78705  Category (See Categories listed at the top of this schedule)	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense Office sought: Office held:  e) Description (If travel outside of Texas, complete Schedule T) coffee for meeting
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/05/2014 Amount (\$) \$11.15  PURPOSE OF EXPENDITURE	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code 504 W 24th Sr Austin, TX 78705  Category (See Categories listed at the top of this schedule)	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) coffee for meeting  Check if Austin, TX, officeholder living expense
Date 11/03/2014 Amount (\$) \$5.14  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/05/2014 Amount (\$) \$11.15	Starbucks  Payee address City; State; Zip Code 13450 Research Blvd Austin, TX 78750  Category (See Categories listed at the top of this schedule Food/Beverage Expense  Candidate / Officeholder name  Payee name Starbucks  Payee address City; State; Zip Code 504 W 24th Sr Austin, TX 78705  Category (See Categories listed at the top of this schedule Food/Beverage Expense)	e) Description (If travel outside of Texas, complete Schedule T) Coffee for volunteers  Check if Austin, TX, officeholder living expense Office sought: Office held:  e) Description (If travel outside of Texas, complete Schedule T) Coffee for meeting  Check if Austin, TX, officeholder living expense

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundrais nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Distric Printing Expense Office Overhead/Re The Instruction Guide explains how to	ntract Labor sing Expense Transportation Equipment & Related Expense Contributions/Donations Made By ct Candidate/Officeholder/Political Committee ental Expense Complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 16/22	Report: 70/78 Flannigan, James (Mr.)	00629478
4 Date	5 Payee name	
11/08/2014	Starbucks	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$15.64	13450 Research Blvd Austin, TX 78750	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Food/Beverage Expense	coffee/food for volunteers
OF	Toda, Bovorago Enpondo	
EXPENDITURE		Check if Austin, TX, officeholder living expense
A C ONLY #	Candidate / Officeholder name	Office sought: Office held:
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Oniceriolder name	Office soughi.
Date	Payee name	
11/15/2014	Starbucks	
Amount (\$)	Payee address City, State; Zip Code	
<b>\$1</b> 5.21	13450 Research Blvd Austin, TX 78750	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Food/Beverage Expense	coffee for volunteers
OF EXPENDITURE	•	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	<u> </u>
11/16/2014	Starbucks	
Amount (\$)	Payee address City; State; Zip Code	
\$17.43	13450 Research Blvd Austin, TX 78750	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Coffee/food for volunteers
HOHORE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/25/2014	Starbucks	
Amount (\$)	Payee address City; State; Zip Code	
\$6.06	13450 Research Blvd Austin, TX 78750	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Food/Beverage Expense	coffee for volunteers
OF EXPENDITURE	· ·	
EXPERDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Carraidate / Cincontridor Harris	Office risks.

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

direct expenditure to benefit C/OH

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) PAGE# FILER NAME 2 Flannigan, James (Mr.) 00629478 Schedule: 17/22 Report: 71/78 4 Date 5 Payee name Strategic Payment Systems, Inc. 11/04/2014 6 Amount (\$) Payee address City; State; Zip Code 45 Dan Rd \$21.05 Suite 100 Canton, MA 02021 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE fees associated with online payment gateway Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought: Office held: 9 Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Pavee name Strategic Payment Systems, Inc. 11/07/2014 Amount (\$) Pavee address City: State: Zip Code 45 Dan Rd \$130.51 Suite 100 Canton, MA 02021 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** statement fees for credit card processing Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name Strategic Payment Systems, Inc. 11/07/2014 State; Amount (\$) Payee address City; Zip Code 45 Dan Rd \$5.00 Suite 100 Canton, MA 02021 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** fees associated with credit card swiper payment Accounting/Banking OF EXPENDITURE gateway Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Strategic Payment Systems, Inc. 12/02/2014 City; State; Zip Code Amount (\$) Payee address 45 Dan Rd \$21.30 Suite 100 Canton, MA 02021 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** fees associated with online payment gateway Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

P.O.Box 12070

**EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Consulting Experi	Polling Expense Travel Out Of Di	strict Candidate/Officeholder/Political Committee
Fees	Printing Expense Office Overhead	(Rental Expense OTHER (enter a category not listed above)
	The Instruction Guide explains ho	
1 PAGE#	2 FILER NAME Report: 72/78 Flannigan, James (Mr.)	3 ACCOUNT # (TEC filers) 00629478
Schedule: 18/22	11CPOIL 12110	00029476
4 Date 12/01/2014	5 Payee name Taco Deli	
6 Amount (\$)	7 Payee address City; State; Zip Code	-
\$82.00	Austin, TX 78758	
	,	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Food/Beverage Expense	food for volunteers
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/06/2014	Taco Deli	
Amount (\$)	Payee address City; State; Zip Code	
\$104.46	l	·
Ψ104.40	Austin, TX 78758	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Food/Beverage Expense	food for volunteers
EXPENDITURE	<i>"</i>	
	-	Check if Austin, TX, officeholder living expense
		Office holds
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Candidate / Officeholder name Payee name	Office sought: Office held:
direct expenditure to benefit C/OH		Office sought: Office held:
direct expenditure to benefit C/OH  Date	Payee name	Office sought: Office held:
direct expenditure to benefit C/OH  Date 11/08/2014	Payee name Target Payee address City: State; Zip Code 11220 RM 2222	Office sought: Office held:
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$)	Payee name Target Payee address City; State; Zip Code	Office sought: Office held:
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$)	Payee name Target Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730	
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$)	Payee name Target Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule)	Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) pens, clipboards
Date 11/08/2014 Amount (\$) \$25.46	Payee name Target Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730	Description (If travel outside of Texas, complete Schedule T)
Date 11/08/2014 Amount (\$) \$25.46	Payee name Target Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) pens, clipboards
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if	Payee name Target Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure	Payee name Target Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officaholder living expense
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officaholder living expense
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officaholder living expense
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officaholder living expense
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$)	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target Payee address City; State; Zip Code	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officaholder living expense
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target  Payee address City; State; Zip Code 11220 RR 2222	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officaholder living expense
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$)	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target Payee address City; State; Zip Code	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officaholder living expense
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$)	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target  Payee address City; State; Zip Code 11220 RR 2222	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 11/08/2014 Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014 Amount (\$) \$17.06	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target  Payee address City; State; Zip Code 11220 RR 2222 Austin, TX 78730	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH  Date 11/08/2014  Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$) \$17.06	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target  Payee address City; State; Zip Code 11220 RR 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 11/08/2014  Amount (\$)  \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014  Amount (\$)  \$17.06	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target  Payee address City; State; Zip Code 11220 RR 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officeholder living expense Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) envelopes, mounting tape  Check if Austin, TX, officeholder living expense
Date 11/08/2014 Amount (\$) \$25.46  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 11/30/2014 Amount (\$) \$17.06	Payee name Target  Payee address City; State; Zip Code 11220 RM 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate / Officeholder name  Payee name Target  Payee address City; State; Zip Code 11220 RR 2222 Austin, TX 78730  Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) pens, clipboards  Check if Austin, TX, officeholder living expense Office sought: Office held:  Description (If travel outside of Texas, complete Schedule T) envelopes, mounting tape

#### (512)463-5800 TDD 1-800-735-2989 Austin, Texas 78711-2070 Texas Ethics Commission P.O.Box 12070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Legal Services Solicitation/Fundraising Expense

Contributions/Donations Made By
Candidate/Officeholder/Political Committee Food/Beverage Expense Travel In District Consulting Expense Event Expense Travel Out Of District
Office Overhead/Rental Expense Polling Expense OTHER (enter a category not listed above) Fees Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Flannigan, James (Mr.) 00629478 Schedule: 19/22 Report: 73/78 4 Date 5 Payee name Twitter 10/27/2014 6 Amount (\$) Payee address City; State; Zip Code 1355 Market St \$125.77 Suite 900 San Francisco, CA 94103 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** flannigan can fix it, endorsement, and gotv twirter Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Twitter 10/28/2014 Pavee address City; State: Zip Code Amount (\$) 1355 Market St \$120.00 Suite 900 San Francisco, CA 94103 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** endorsement and goty ads Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Рауее пате Twitter 11/01/2014 Amount (\$) Pavee address City: State: Zip Code 1355 Market St \$80.00 Suite 900 San Francisco, CA 94103 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** goty ads Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Twitter 11/30/2014 Payee address Amount (\$) City: State: Zip Code 1355 Market St \$29.42 Suite 900 San Francisco, CA 94103 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** runoff gotv and closing statement video Advertising Expense QF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY it Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

Advertising Expo Accounting/Banl Consulting Expo Event Expense Fees	ting Legal Services Solicitation/Fund	Contract Labor Loan Repa raising Expense Transporta Contributio ctrict Candida Rental Expense OTHER (er	nyment/Reimbursement tion Equipment & Related Expense ns/Donations Made By tte/Officeholder/Political Committee nter a category not listed above)
1 PAGE # Schedule: 20/22	Report: 74/78   2 FileR NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478
4 Date 12/01/2014	5 Payee name Twitter		
6 Amount (\$) \$66.64	7 Payee address City; State; Zip Code 1355 Market St Suite 900 San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outs runoff gotv and closing	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/01/2014	US Post Office Central Park West Station		
Amount (\$) \$34.30	Payee address City; State; Zip Code 3507 N Lamar Blvd Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	stamps	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeh	older living expense Office held:
Date 11/17/2014	Payee name US Post Office Central Park West Station		
Amount (\$) \$49.00	Payee address City; State; Zip Code 3507 N Lamar Blvd Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	stamps	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/28/2014	Payee name US Post Office Research CPU		
Amount (\$) \$57.21	Payee address City; State; Zip Code 13376 Research Blvd 128 Austin, TX 78750		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) . Office Overhead/Rental Expense	stamps and envelopes	
		Check if Austin, TX, officeho	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

EXPENDITURE CATEGORIES					
Advertising Expe Accounting/Bank Consulting Exper Event Expense	ing Legal Services Solicitation/Fund nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Di	raising Expense Transportation Equipment & Re Contributions/Donations Made strict Candidate/Officeholder/Polit	lated Expense By cal Committee		
Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above)  The INSTRUCTION GUIDE explains how to complete this form.					
1 PAGE#	2 FILER NAME		T# (TEC filers)		
Schedule: 21/22	Report: 75/78 Flannigan, James (Mr.)	006294	•		
4 Date 11/28/2014	5 Payee name Wells Fargo Bank, N.A.				
6 Amount (\$)	7 Payee address City; State; Zip Code				
\$7.00	l'				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, compl	ete Schedule T)		
PURPOSE OF	Fees	monthly service fee			
EXPENDITURE					
	O a di tata / Office he lida	Check if Austin, TX, officeholder living expens			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office I	leia.		
Date	Payee name				
11/06/2014	Williamson County Election's Department				
Amount (\$)	Payee address City; State; Zip Code				
\$10.22	301 SE Inner Loop Suite 104				
	Georgetown, TX 78626				
		Description of the second			
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complupdated voter list	ete Schedule T)		
OF	Fees				
EXPENDITURE		Check if Austin, TX, officeholder living expens	•		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office			
direct expenditure					
to benefit C/OH					
Date	Payee name				
11/18/2014	Williamson County Election's Department				
Amount (\$)	Payee address City; State; Zip Code				
\$10.22	301 SE Inner Loop Suite 104				
	Georgetown, TX 78626				
		Description we have 57			
PURPOSE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, compl list of people who voted on Election Da	V		
OF	1 663		•		
EXPENDITURE		Check if Austin, TX, officeholder living expens	•		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office I			
direct expenditure to benefit C/OH		-			
Date			<del></del>		
	Payee name				
12/01/2014	Williamson County Election's Department		-		
Amount (\$)	Williamson County Election's Department Payee address City; State; Zip Code				
	Williamson County Election's Department  Payee address City; State; Zip Code  301 SE Inner Loop				
Amount (\$)	Williamson County Election's Department Payee address City; State; Zip Code				
Amount (\$)	Williamson County Election's Department Payee address City; State; Zip Code 301 SE Inner Loop Suite 104 Georgetown, TX 78626	Description (If travel outside of Tayse compl	ete Schedule T\ □		
Amount (\$)	Williamson County Election's Department  Payee address City; State; Zip Code  301 SE Inner Loop Suite 104 Georgetown, TX 78626  Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complearly voting returns lists	ete Schedule T)		
Amount (\$) \$112.41 PURPOSE OF	Williamson County Election's Department Payee address City; State; Zip Code 301 SE Inner Loop Suite 104 Georgetown, TX 78626		ete Schedule T) [		
Amount (\$) \$112.41 PURPOSE	Williamson County Election's Department  Payee address City; State; Zip Code  301 SE Inner Loop Suite 104 Georgetown, TX 78626  Category (See Categories listed at the top of this schedule)	early voting returns lists			
Amount (\$) \$112.41 PURPOSE OF	Williamson County Election's Department  Payee address City; State; Zip Code  301 SE Inner Loop Suite 104 Georgetown, TX 78626  Category (See Categories listed at the top of this schedule)		ę		

SCHEDITIE E

FOLITIC	AL EXPENDITORES		SCHEDOLE I
	EXPENDITURE CATE		
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fund	raising Expense Transporta Contributio strict Candida Rental Expense OTHER (e	yment/Reimbursement tion Equipment & Related Expense ns/Donations Made By tte/Officeholder/Political Committee nter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT# (TEC filers)
Schedule: 22/22			00629478
4 Date 12/01/2014	5 Payee name Williamson County Election's Department		
6 Amount (\$)	7 Payee address City: State; Zip Code		<del></del>
\$112.41	301 SE Inner Loop Suite 104 Georgetown, TX 78626		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel out ballot by mail returns li	side of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officeh	older living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			<del></del>

#### 100 0000

Check if Austin, TX, officeholder living expense

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Transportation Equipment & Related Expense Travel In District
Travel Out Of District
Office Overhead/Rental Expense Contributions/Donations Made By
Candidate/Officeholder/Political Committee Consulting Expense Event Expense Polling Expense OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Flannigan, James (Mr.) 00629478 Schedule: 1/1 Report: 77/78 4 Date 5 Payee name 11/08/2014 FedEx City: State: Zip Code Payee address 6 Amount (\$) 13729 N Hwy 183 Austin, TX 78750 \$64.95 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** mail in ballot applications Printing Expense OF **EXPENDITURE** 

#### TEXT ANNOTATION Flannigan, James (Mr.)

Page 78 of 78 ACCOUNT # 00629478

#### Information entered by filer as a memo

Schedule A

Out of State PACs: Item 88 -- 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 \*\*\*\*\*\*\*\*\*\*\*\* Item 186 -- Internation Brotherhood of Electrical Workers PAC | address 900 7th St NW, Washington, DC, 20001 | ph: 202-728-6046 | Treasurer: Salvatore J. Chilia, 900 7th St NW, Washington, DC, 20001; 202-728-6046 \*\*\*\*\*\*\*\*\*\*\*\* Item 188 -- American Federation of State, County, and Municipal Employees PEOPLE PAC | address: 1625 L St NW, Washington, DC, 20036 | ph: 202-429-1007 | Treasurer: Laura M. Reyes, 1625 L St NW, Washington, DC 20036; 202-429-1200