

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | |
|--|---|------------|--|----------------------------|--------|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID | | 2 Total pages filed: 24 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Jimmy | | OFFICE USE ONLY Date Received OCC RECEIVED AT JAN 15 '20 AM 11:45 | | |
| | NICKNAME LAST SUFFIX Flannigan | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 2649 Austin, TX 78768 | | Date Hand-delivered or Date Postmarked | | |
| | | | Receipt # | | Amount |
| | | | Date Processed | | |
| | | | Date Imaged | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Noel | | | | |
| | NICKNAME LAST SUFFIX Landuyt | | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 10100 Lachlan Dr. Austin, TX 78717 | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 773-8437 | | | | |
| 8 REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | |
| 9 PERIOD COVERED | Month Day Year Month Day Year 07/01/2019 THROUGH 12/31/2019 | | | | |
| 10 ELECTION | ELECTION DATE Month Day Year 11/03/2020 | | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | | |
| | | | | | |
| 11 OFFICE | OFFICE HELD (if any) Austin City Council, District 6 | | 12 OFFICE SOUGHT (if known) Austin City Council, District 6 | | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

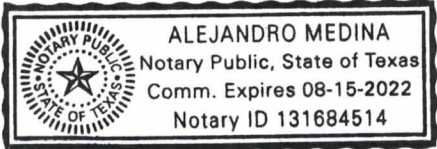
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|-----------------------|------------------|--------------------|--|
| 13 C / OH NAME | Flannigan, Jimmy | 14 Filer ID | |
|-----------------------|------------------|--------------------|--|


| | | | |
|---|--|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | |
| | COMMITTEE TYPE | COMMITTEE NAME | |
| | <input type="checkbox"/> GENERAL | | |
| | <input type="checkbox"/> SPECIFIC | COMMITTEE ADDRESS | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | | |

| | | | | |
|--------------------------------|----|--|----|-----------|
| 16 CONTRIBUTION TOTALS | 1. | TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 1,725.00 |
| | 2. | TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 13,009.00 |
| EXPENDITURE TOTALS | 3. | TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 40.00 |
| | 4. | TOTAL POLITICAL EXPENDITURES | \$ | 2,629.95 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 10,248.88 |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 4,695.00 |

17 AFFADAVIT




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



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jimmy Flannigan, this the 15th day of January, 20 20, to certify which, witness my hand and seal of office.


 Signature of officer administering

Alejandro Medina
 Printed name of officer administering

notary public
 Title of officer administering oath

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

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| | | | |
|--|---|--------------------|-----------|
| 18 FILER NAME Flannigan, Jimmy | | 19 Filer ID | |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 13,009.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ | 1,215.00 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 2,629.95 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ | |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 12/30/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Greg <hr/> 6 Contributor address; City; State; Zip Code 301 West Ave #3302 Austin, TX 78701 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) Affordable Housing | | 9 Employer (See Instructions) Austin Habitat for Humanity |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bone, Sandi <hr/> Contributor address; City; State; Zip Code 10407 Ember Glen Dr Austin, TX 78726 | Amount of Contribution (\$) \$316.00 |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) N/A |
| Date 12/28/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bone, Sandi <hr/> Contributor address; City; State; Zip Code 10407 Ember Glen Dr Austin, TX 78726 | Amount of Contribution (\$) \$84.00 |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) N/A |
| Date 12/31/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucy, John <hr/> Contributor address; City; State; Zip Code 12702 Oro Valley Trl Austin, TX 79729 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/07/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Roxanna <hr/> Contributor address; City; State; Zip Code 13137 Partridge Bend Dr Austin, TX 78729 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) nurse | | Employer (See Instructions) St. David's |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 11/07/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Ruben <hr/> 6 Contributor address; City; State; Zip Code 13137 Partridge Bend Dr Austin, TX 78729 | 7 Amount of Contribution (\$) \$350.00 |
| 8 Principal occupation / Job title (See Instructions) IT Manager | | 9 Employer (See Instructions) Dell |
| Date 12/02/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childs, Bill <hr/> Contributor address; City; State; Zip Code 9213 Villa Norte Dr Austin, TX 78726 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Professor of History, Emeritus Ohio State University | | Employer (See Instructions) Retired |
| Date 12/31/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Terry <hr/> Contributor address; City; State; Zip Code 3116 GOLDENOAK Cir Round Rock, TX 78681 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Elected Official | | Employer (See Instructions) Williamson County |
| Date 12/31/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coon, Jonathan <hr/> Contributor address; City; State; Zip Code 3939 Bee Caves Road C100 Austin, TX 78746 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Founder | | Employer (See Instructions) Impossible ventures |
| Date 12/31/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coon, Kirsten <hr/> Contributor address; City; State; Zip Code 3939 Bee Caves Road C100 Austin, TX 78746 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Co-Founder | | Employer (See Instructions) Impossible ventures |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 12/26/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crossley, Jay <hr/> 6 Contributor address; City; State; Zip Code 6911 Rufus Dr Austin, TX 78752 | 7 Amount of Contribution (\$) \$400.00 |
| 8 Principal occupation / Job title (See Instructions) nonprofit advocacy | | 9 Employer (See Instructions) Farm & City |
| Date 12/31/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Edward <hr/> Contributor address; City; State; Zip Code 2500 Walsh Tarlton Ln #1709 Austin, TX 78746 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) Progress Texas |
| Date 11/12/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fonte, Bears <hr/> Contributor address; City; State; Zip Code 13225 Hymeadow Cir Austin, TX 78729 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Filmmaker | | Employer (See Instructions) Self |
| Date 11/12/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fonte, Erin <hr/> Contributor address; City; State; Zip Code 13225 Hymeadow Cir Austin, TX 78729 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Hunton Andrews & Kurth |
| Date 12/19/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Eric <hr/> Contributor address; City; State; Zip Code 1159 Brookwood Ave Austin, TX 78721 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 12/31/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorse, Michael <hr/> 6 Contributor address; City; State; Zip Code 1510 W North Loop Blvd Unit 126 Austin, TX 78756 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunn, Kristen <hr/> Contributor address; City; State; Zip Code 9009 N FM 620 Apt 1803 Austin, TX 78726 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) TV Producer | | Employer (See Instructions) Self Employed |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillin, Misty <hr/> Contributor address; City; State; Zip Code 102 Squires Dr Austin, TX 78734 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Massage Therapist |
| Date 12/31/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Islam, Rashed <hr/> Contributor address; City; State; Zip Code 11901 Palisades Pkwy Austin, TX 78732 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) HDR Engineering, Inc. |
| Date 11/08/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobi, Rick <hr/> Contributor address; City; State; Zip Code 10807 Bonaparte Bnd Austin, TX 78750 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) Nuclear Engineer/Attorney | | Employer (See Instructions) Jacobi Consulting |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 11/11/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jogee, Tanya <hr/> 6 Contributor address; City; State; Zip Code 10236 Chestnut Ridge Rd Austin, TX 78726 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Communications consultant | | 9 Employer (See Instructions) Self employed |
| Date 12/31/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kester, Steven <hr/> Contributor address; City; State; Zip Code 6903 glen Rdg austin, TX 78731 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) manager | | Employer (See Instructions) Apple |
| Date 11/08/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landyut, Noel <hr/> Contributor address; City; State; Zip Code 10100 Lachlan Dr Austin, TX 78717 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) The University of Texas at Austin |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohamed, Basheer A. <hr/> Contributor address; City; State; Zip Code 1008 Lakewood Hills Ter Austin, TX 78732 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/28/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mooty, Greg <hr/> Contributor address; City; State; Zip Code 5220 Keene Cv Austin, TX 78730 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 12/29/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Fred <hr/> 6 Contributor address; City; State; Zip Code 12302 Saber Trl Austin, TX 78750 | 7 Amount of Contribution (\$) \$84.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/25/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelosi, Jan <hr/> Contributor address; City; State; Zip Code 10020 Valona Dr Austin, TX 78717 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Laurence <hr/> Contributor address; City; State; Zip Code 3220 Amy Donovan Plz Apt 10106 Austin, TX 78758 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sartin, Rachel <hr/> Contributor address; City; State; Zip Code 10412 Ember Glen Dr Austin, TX 78726 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) NA | | Employer (See Instructions) NA |
| Date 11/08/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schumann, Gary <hr/> Contributor address; City; State; Zip Code 10100 Lachlan Dr Austin, TX 78717 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) attorney | | Employer (See Instructions) Self employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 12/31/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shade, Randi <hr/> 6 Contributor address; City; State; Zip Code 1822 W 10th St Austin, TX 78703 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheryl Cole Campaign (see memo) <hr/> Contributor address; City; State; Zip Code 4101 Wildwood Austin, TX 78722 | Amount of Contribution (\$) \$800.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/25/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David C <hr/> Contributor address; City; State; Zip Code 3423 Mount Barker Dr Austin, TX 78731 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) United Way for Greater Austin |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snodgrass, Phyllis <hr/> Contributor address; City; State; Zip Code 1900 Barton Springs Rd Unit 5003 Austin, TX 78704 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/19/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Jennifer <hr/> Contributor address; City; State; Zip Code 5658 Sugar HI Houston, TX 77056 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Real Estate Development | | Employer (See Instructions) Slate Real Estate Partners |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 12/19/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Mark <hr/> 6 Contributor address; City; State; Zip Code 5658 Sugar HI Houston, TX 77056 | 7 Amount of Contribution (\$) \$400.00 |
| 8 Principal occupation / Job title (See Instructions) Real Estate Development | | 9 Employer (See Instructions) Slate Real Estate Partners |
| Date 11/08/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terkel, Tom <hr/> Contributor address; City; State; Zip Code 3916 Arbor Glen Way Austin, TX 78731 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) Real Estate Developer | | Employer (See Instructions) FourT Realty |
| Date 12/29/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsao, Ping-Ping <hr/> Contributor address; City; State; Zip Code 13229 Ring St. Austin, TX 78653 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) volunteer | | Employer (See Instructions) none |
| Date 12/02/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsao, Ping-Ping <hr/> Contributor address; City; State; Zip Code 13229 Ring St. Austin, TX 78653 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) volunteer | | Employer (See Instructions) none |
| Date 12/16/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsao, Ping-Ping <hr/> Contributor address; City; State; Zip Code 13229 Ring St. Austin, TX 78653 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) volunteer | | Employer (See Instructions) none |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/24 |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID |
| 4 Date 12/04/2019 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warriner, George 6 Contributor address; City; State; Zip Code 15105 Savannah Heights Dr Austin, TX 78717 | 7 Amount of Contribution (\$) \$400.00 |
| 8 Principal occupation / Job title (See Instructions) N/A | | 9 Employer (See Instructions) N/A |
| Date 12/04/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warriner, Joy Contributor address; City; State; Zip Code 15105 Savannah Heights Dr Austin, TX 78717 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/30/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Maria Contributor address; City; State; Zip Code 1802 SAN GABRIEL Austin, TX 78701 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Accountant/CPA | | Employer (See Instructions) Unemployed |
| Date 12/30/2019 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Philip Contributor address; City; State; Zip Code 1802 SAN GABRIEL Austin, TX 78701 | Amount of Contribution (\$) \$400.00 |
| Principal occupation / Job title (See Instructions) Community Volunteer | | Employer (See Instructions) N/A |
| | | |

LOANS**SCHEDULE E**

| | | | |
|---|--|---|----------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/3 Rpt: 13/24 | |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID | |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ | |
| 5 Date of loan 08/28/2019 | 7 Name of lender Flannigan, James T. <input type="checkbox"/> out-of-state PAC (ID#: _____) | 9 Loan Amount (\$) \$145.00 | |
| 6 Is lender a financial institution? No | 8 Lender address; City; State; Zip Code 12304 B Cahone Trl Austin, TX 78729 | 10 Interest Rate | |
| | | 11 Maturity Date | |
| 12 Principal occupation / Job title (See Instructions) Council Member | | 13 Employer (See Instructions) Austin City Council | |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/> | |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor | | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | | |
| 20 Principal occupation | | 21 Employer (See Instructions) | |
| Date of loan 08/09/2019 | Name of lender Flannigan, James T. <input type="checkbox"/> out-of-state PAC (ID#: _____) | Loan Amount (\$) \$195.00 | |
| Is lender a financial institution? No | Lender address; City; State; Zip Code 12304 B Cahone Trl Austin, TX 78729 | Interest Rate | |
| | | Maturity Date | |
| Principal occupation / Job title (See Instructions) Council Member | | Employer (See Instructions) Austin City Council | |
| Description of Collateral <input checked="" type="checkbox"/> None | | Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/> | |
| GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | Name of guarantor | | Amount Guaranteed (\$) |
| | Guarantor address; City; State; Zip Code | | |
| Principal occupation | | Employer (See Instructions) | |
| | | | |

LOANS

SCHEDULE E

| | | | |
|---|--|---|----------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 2/3 Rpt: 14/24 | |
| 2 FILER NAME Flannigan, Jimmy | | 3 Filer ID | |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ | |
| 5 Date of loan 09/06/2019 | 7 Name of lender Flannigan, James T. <input type="checkbox"/> out-of-state PAC (ID#: _____) | 9 Loan Amount (\$) \$275.00 | |
| 6 Is lender a financial institution? No | 8 Lender address; City; State; Zip Code 12304 B Cahone Trl Austin, TX 78729 | 10 Interest Rate | |
| | | 11 Maturity Date | |
| 12 Principal occupation / Job title (See Instructions) Council Member | | 13 Employer (See Instructions) Austin City Council | |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/> | |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor | | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | | |
| 20 Principal occupation | | 21 Employer (See Instructions) | |
| Date of loan 10/25/2019 | Name of lender Flannigan, James T. <input type="checkbox"/> out-of-state PAC (ID#: _____) | Loan Amount (\$) \$300.00 | |
| Is lender a financial institution? No | Lender address; City; State; Zip Code 12304 B Cahone Trl Austin, TX 78729 | Interest Rate | |
| | | Maturity Date | |
| Principal occupation / Job title (See Instructions) Council Member | | Employer (See Instructions) Austin City Council | |
| Description of Collateral <input checked="" type="checkbox"/> None | | Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/> | |
| GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | Name of guarantor | | Amount Guaranteed (\$) |
| | Guarantor address; City; State; Zip Code | | |
| Principal occupation | | Employer (See Instructions) | |

LOANS**SCHEDULE E****The Instruction Guide explains how to complete this form.****1** Total pages Schedule E:
Sch: 3/3 Rpt: 15/24**2** FILER NAME

Flannigan, Jimmy

3 Filer ID**4** TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
07/01/2019**7** Name of lender☐ out-of-state PAC (ID#: _____)

Flannigan, James T.

9 Loan Amount (\$)

\$300.00

6 Is lender a
financial
institution?
No**8** Lender address; City;
12304 B Cahone Trl

State; Zip Code

Austin, TX 78729

10 Interest Rate**11** Maturity Date**12** Principal occupation / Job title (See Instructions)

Council Member

13 Employer (See Instructions)

Austin City Council

14 Description of Collateral☒ None**15** Check if personal funds were deposited into political account
(See Instructions)☒**16** GUARANTOR
INFORMATION☒ not applicable**17** Name of guarantor**18** Guarantor address; City; State; Zip Code**19** Amount Guaranteed (\$)**20** Principal occupation**21** Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 1/8 Rpt: 16/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 12/02/2019 | 5 Payee name Authorize.net | |
| 6 Amount (\$) \$200.60 | 7 Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/03/2019 | Candidate/Officeholder name Payee name Authorize.net | |
| Amount (\$) \$11.55 | Office sought Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/04/2019 | Candidate/Officeholder name Payee name Authorize.net | |
| Amount (\$) \$10.00 | Office sought Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 2/8 Rpt: 17/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 10/02/2019 | 5 Payee name Authorize.net | |
| 6 Amount (\$) \$10.00 | 7 Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 09/02/2019 | Candidate/Officeholder name Payee name Authorize.net | |
| Amount (\$) \$10.00 | Office sought Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 07/02/2019 | Candidate/Officeholder name Payee name Authorize.net | |
| Amount (\$) \$10.00 | Office sought Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 3/8 Rpt: 18/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 12/02/2019 | 5 Payee name Authorize.net | |
| 6 Amount (\$) \$112.50 | 7 Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/01/2019 | Payee name Facebook | |
| Amount (\$) \$120.60 | Payee address; City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/01/2019 | Payee name Facebook | |
| Amount (\$) \$108.50 | Payee address; City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 4/8 Rpt: 19/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 08/01/2019 | 5 Payee name Facebook | |
| 6 Amount (\$) \$52.51 | 7 Payee address; City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 09/03/2019 | Candidate/Officeholder name Facebook | |
| Amount (\$) \$49.07 | Payee address; City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 10/01/2019 | Candidate/Officeholder name Facebook | |
| Amount (\$) \$41.02 | Payee address; City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 5/8 Rpt: 20/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 12/02/2019 | 5 Payee name Facebook | |
| 6 Amount (\$) \$200.60 | 7 Payee address; City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/30/2019 | Payee name Nationbuilder | |
| Amount (\$) \$179.00 | Payee address; City; State; Zip Code 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/29/2019 | Payee name Nationbuilder | |
| Amount (\$) \$179.00 | Payee address; City; State; Zip Code 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 6/8 Rpt: 21/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 10/29/2019 | 5 Payee name Nationbuilder | |
| 6 Amount (\$) \$179.00 | 7 Payee address; City; State; Zip Code 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 09/30/2019 | Candidate/Officeholder name Payee name Nationbuilder | |
| Amount (\$) \$179.00 | Office sought Payee address; City; State; Zip Code 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 08/29/2019 | Candidate/Officeholder name Payee name Nationbuilder | |
| Amount (\$) \$179.00 | Office sought Payee address; City; State; Zip Code 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 7/8 Rpt: 22/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 07/29/2019 | 5 Payee name Nationbuilder | |
| 6 Amount (\$) \$179.00 | 7 Payee address; City; State; Zip Code 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 07/01/2019 | Candidate/Officeholder name Payee name Nationbuilder | |
| Amount (\$) \$179.00 | Office sought Payee address; City; State; Zip Code 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database software |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/19/2019 | Candidate/Officeholder name Payee name Texas Democratic Party | |
| Amount (\$) \$200.00 | Office sought Payee address; City; State; Zip Code 1106 Lavaca St #100 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/8 Rpt: 23/24 | 2 FILER NAME Flannigan, Jimmy | 3 Filer ID |
| 4 Date 11/26/2019 | 5 Payee name Texas Democratic Party | |
| 6 Amount (\$) \$200.00 | 7 Payee address; City; State; Zip Code 1106 Lavaca St #100 Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate/Officeholder name | | |
| Office sought | | |
| Office held | | |

TEXT ANNOTATION

Sch: 1/1 Rpt: 24/24

FILER NAME

Flannigan, Jimmy

Filer ID

Schedule

A1

Information entered by filer as a memo:

\$400 has been returned to Sheryl Cole Campaign.