	OFFICEHOLDER INANCE REPORT		FORM C/OH COVER SHEET PG 1
The C/OH INSTRUCTION GUI	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 12345678	2 PAGE# 1 of 42
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Mr. Lloyd	MI	OFFICE USE ONLY
NAME	Mr. Lloyd NICKNAME LAST Pete Phillips	suffix Jr.	Date Received AUSTIN RE
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 6001 W. Parmer Lane Ste. 370, #123	CITY: STATE; ZIP CODE	Date Hand-delivered at Date Postmarked
Change of Address	Austin, TX 78727		12 SAMOUNT
5 CAMPAIGN	MS/MRS/MR FIRST		Date Processed
TREASURER NAME	Mr. Charles		Date Imaged
	NICKNAME LAST Granger	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT 6001 W. Parmer Lane Ste. 370, #128 Austin, TX 78727	T/SUITE#; CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 563-7226	EXTENSION	
8 REPORT TYPE	January 15 X 30th day before		15th day after campaign treasurer appointment (officeholder only)
	July 15 8th day before e	election Exceeded \$500 limit	Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year	Month Day	Year
_	07/01/2014	09/26/20	14
10 ELECTION	Month Day Van	ON TYPE Primary Runoff X	General Special
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Austin City Council [
	GO 1	TO PAGE 2	

P.O. Box 12070 **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Phillip	os, Lloyd Jr. (Mr.)		14 ACCOUNT # 12345678	(Ethics Commission filers)	
15 NOTICE FROM	have been made with	lice of political expenditures by political committees to support the ca nout the candidate's or officeholder's knowledge or consent. Candidately by receive notice of such expenditures	andidate / officeholde tes and officeholders	r. These expenditures may are required to report this	
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
16 CONTRIBUTION		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN			
TOTALS	2. TOTAL	S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED POLITICAL CONTRIBUTIONS	\$	0.00	
EVOCUOCIUDE		THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,230.00	
EXPENDITURE TOTALS	DITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED S			0.00	
	4. TOTAL I	POLITICAL EXPENDITURES	\$	12,142.28	
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE Y OF THE REPORTING PERIOD		8,310.65	
OUTSTANDING LOAN TOTALS		OTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AST DAY OF THE REPORTING PERIOD		4,580.88	
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 18. Election code. JOHN W ORCHARD Notary Public, State of Texas My Commission Expires January 21, 2018 Signature of Candidate or Officeholder					
	STAMP / SEAL ABOV	ne said Lloyd Phillips, Jr.	this the	6 +1 day	
of Ogtober	11.	tify which, witness my hand and seal of office.	, mis me	day	
Signature of officer admi	nistering oath	John W. Orchard Print name of officer administering oath	Notory Title of officer ad	Public ministering oath	

	The INSTRUCTION	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 1/	11 Report: 3/42
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)			3 ACCOUNT# 12345678	(Ethics Commission filers)
4	Date	5 Full name of contributor Arnes, Steven	out-of-state PAC (ID#	<u>*</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/24/2014	6 Contributor address; 2903 Richard Lane Austin, TX 78703	City; State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Business Dev	pation / Job title (See Instruction velopment	s)	10 Employer (See In Wellaware.us	structions)	
	Date	Full name of contributor Bangle, Shannon	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/16/2014	Contributor address; 2107 Tower Drive Austin, TX 78703	City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$100.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Lawyer	pation / Job title (See Instruction	s)	Employer (See In BBS	structions)	
	Date	Full name of contributor Baselice, Mike	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/30/2014	Contributor address; 2708 Mtn. Laurel Drive Austin, TX 78703	City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Opinion Rese	pation / Job title (See Instructions earch	s)	Employer (See In Baselice & Asso		
	Date	Full name of contributor Bodisch, Charisse	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/20/2014	Contributor address; 2603 Deep River Cir Round Rock, TX 78665-5639	City; State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions nic Development	s)	Employer (See In Austin Chamber		
	Date	Full name of contributor Candas, Mehmet	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/16/2014	Contributor address; 4228 Columbine Drive Austin, TX 78727-2644	City; State; Zip Code		\$150.00 	
					(If travel outside of	Texas, complete Schedule T)
	Principal occupa Professor	ation / Job title (See Instructions	s)	Employer (See In: University of Te		

	1 PAGE#	11 Report: 4/42
	3 ACCOUNT # 12345678	(Ethics Commission filers)
)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
•••••	\$350.00	
	(If travel outside of	Texas, complete Schedule T)
10 Employer (See In: Data Search	structions)	
0#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	\$25.00	
	<u> </u>	Texas, complete Schedule T)
Employer (See In: Austin ISD	structions)	
)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	\$100.00	
		Texas, complete Schedule T)
Employer (See In: N/A	structions)	
)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	\$100.00	I I I
	(if travel outside of	Texas, complete Schedule T)
Employer (See In: N/A	structions)	
#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	\$350.00	
	(If travel outside of	Texas, complete Schedule T)
Employer (See Ins Self	structions)	
	Employer (See In N/A Employer (See In N/A Employer (See In N/A Employer (See In N/A	Schedule: 2/ 3 ACCOUNT # 12345678 7 Amount of contribution (\$) \$350.00 [If travel outside of contribution (\$) #

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 3/	11 Report: 5/42
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT# 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Cooper, Robbi	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
08/16/2014	6 Contributor address; City; State; Zip Code 9 Scott Crescent Austin, TX 78703		\$350,00	
		!	(If travel outside of	Texas, complete Schedule T)
9 Principal occup Stay-at-home	pation / Job title (See Instructions) e-mom	10 Employer (See In: N/A	structions)	
Date	Full name of contributor	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/14/2014	Contributor address; City; State; Zip Code 4015 Walnut Clay Drive Austin, TX 78731		\$350.00	
Crissian occur				Texas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Ins N/A	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Dieta, Margaret	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 19706 Redroot Drive Houston, TX 77084		\$35.00	 -
				Texas, complete Schedule T)
Principal occup Surgical Assis	pation / Job title (See Instructions) stant	Employer (See Ins McGrath Medica		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 1620 E Riverside #5053 Austin, TX 78741		\$35.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup office director	ation / Job title (See Instructions)	Employer (See Ins Authentic Smiles		
Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/29/2014	Contributor address; City; State; Zip Code 11406 Toledo Dr Austin, TX 78759-4954		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Real Estate B	roker	Texas Investme	ent Property Group)

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	44 D
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)	 -	3 ACCOUNT # 12345678	11 Report: 6/42 (Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Fisher, Christine	<u> </u>		8 In-kind contribution description (if applicable)
	09/24/2014	6 Contributor address; City; State; Zip Code 2105 Meadowbrook Drive Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$350.00	
	<u> </u>			(If travel outside of	Texas, complete Schedule T)
9	Principal occup Doctor	pation / Job title (See Instructions)	10 Employer (See In Seton	structions)	
	Date	Full name of contributor □ out-of-state PAC (ID# Franklin, Mark	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/16/2014	Contributor address; City; State; Zip Code 2413 Indian Trail Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$350.00	
	District occur			<u> </u>	Texas, complete Schedule T)
	Principal occup Consultant	pation / Job title (See Instructions)	Employer (See In Franklin & Asso		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/01/2014	Contributor address; City; State; Zip Code 10510 Floral Park Austin, TX 78759		\$10.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Creative Direc	vation / Job title (See Instructions) ctor	Employer (See In self-employed	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Guido, David	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/08/2014	Contributor address; City; State; Zip Code 108 Rainbow Ave Ft. Benning, GA 31905		\$200.00	
L				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) Ian What To Do	Employer (See In: The Man	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Haggerty, Patrick)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/15/2014	Contributor address; City; State; Zip Code 3313 Poquita Ct. El Paso, TX 77904		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) overnment Affairs	Employer (See In- Self-employed	structions)	
i					

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/*	11 Report: 7/42
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4	Date	5 Full name of contributor	<i>#</i>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/17/2014	6 Contributor address; City; State; Zip Code 1900 Scofield Ridge Pkwy #4901 Austin, TX 78727		\$150.00	
<u> </u>	_		ļ	(If travel outside of	Texas, complete Schedule T)
9		pation / Job title (See Instructions) ources Asst. VP	10 Employer (See In: Assurant Field A	nstructions)	,
	Date	Full name of contributor	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/22/2014	Contributor address; City; State; Zip Code 11805 Buzz Schneider Ln. Austin, TX 78748		\$60.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occupation Advertising/M	pation / Job title (See Instructions) Marketing	Employer (See Ins LCE	structions)	_
	Date	Full name of contributor ut-of-state PAC (ID# Harris, Walter	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/20/2014	Contributor address; City; State; Zip Code 11805 Buzz Schneider Ln. Austin, TX 78748		\$60.00]
				He traval auteide of	Texas, complete Schedule T)
		pation / Job title (See Instructions)	Employer (See Ins		Texas, complete Schedule 1/
_	Advertising/M		LCE	**************************************	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/22/2014	Contributor address; City; State; Zip Code 11805 Buzz Schneider Ln. Austin, TX 78748		\$60.00	
)	I		(If travel outside of	Texas, complete Schedule T)
	Principal occupa Advertising/Ma	pation / Job title (See Instructions) larketing	Employer (See Ins LCE		19x2s, complete Schedule 1,
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
		Howard, Jay		contribution (\$)	description (if applicable)
	09/22/2014	Contributor address; City; State; Zip Code 823 Congress Ave., Ste. 900 Austin, TX 78701		\$350.00]
]	ı		(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins HillCo Partners	<u> </u>	

		<u> </u>		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/	11 Report: 8/42
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT# 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Ikard, III, Frank)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/16/2014	6 Contributor address; City; State; Zip Code 3806 Bailey Lane Unit 1 Austin, TX 78756-3910		\$50.00	 Texas, complete Schedule T}
9 Principal occur Lawyer, Part	pation / Job title (See Instructions) ner	10 Employer (See In Ikard & Golder	nstructions)	Texas, complete scriedule 1)
Date	Full name of contributor ut-of-state PAC (ID Johnson, Kim	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/15/2014	Contributor address, City, State, Zip Code 13317 Amasia Dr Austin, TX 78729	*************	\$35.00	
· 			(if travel outside of	Texas, complete Schedule T)
Principal occup Administratio	pation / Job title (See Instructions)	Employer (See Ir Crossover Hea	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/15/2014	Contributor address; City; State; Zip Code 3436 Ribbon Reef Lane Austin, TX 78728-4381		\$100.00	,
<u> </u>	· ·		(If travel outside of	Texas, complete Schedule T)
Principal occup Director	ation / Job title (See Instructions)	Employer (See In Raindrop Turkis	nstructions) sh House Austin Bi	ranch
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/15/2014	Contributor address; City; State; Zip Code 3811 Avenue F Austin, TX 78751	• • • • • • • • • • • • • • • • • • • •	\$350.00 	•
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup Ballet Teache	ation / Job title (See Instructions)	Employer (See In Tarrytown Dand		
Date	Full name of contributor ut-of-state PAC (ID# Kronoveter, Kevin)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/05/2014	Contributor address; City; State; Zip Code 3808 CARRIAGE POINTE DRIVE Crestwood, KY 40014		\$35.00 	
Principal occupa Pilot	ation / Job title (See Instructions)	Employer (See In		exas, complete Schedule T)

				
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/	11 Report: 9/42
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Lamy, Lucille	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
09/12/2014	6 Contributor address; City; State; Zip Code 1717 W. 6th St., Ste. 390 Austin, TX 78703	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	1 1 1
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Stay-at-home	eation / Job title (See Instructions) e-mom	10 Employer (See In N/A	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/12/2014	Contributor address; City; State; Zip Code 1717 W. 6th St., Ste. 390 Austin, TX 78703		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See In	structions)	Texas, complete achequie 1)
Chairman of t	ine Board	Sage Land Con	npany	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/19/2014	Contributor address; City; State; Zip Code 2300 McCullough St. Austin, TX 78703		\$350.00] .
			(If travel outside of	Texas, complete Schedule T)
Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See Ins Stream Real Pa	structions)	Toxas, complate schedule 1)
Date	Full name of contributor ut-of-state PAC (ID# Lutz, Amy	· · · · · · · · · · · · · · · · · · ·	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 3306 Jamesborough Street Austin, TX 78703		\$350.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa Self confidence	ation / Job title (See Instructions) ce	Employer (See Ins Self	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
07/26/2014	Contributor address; City; State; Zip Code 1342 Aalapapa Dr Kailua, HI 96734	••••••	\$100.00 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occupa retitred	ation / Job title (See Instructions)	Employer (See Ins N/A		

The INSTRUCTI	ON GUIDE explains how to complete this form.		1 PAGE#	
2 FILER NAME				11 Report: 10/42
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT#	(Ethics Commission filers)
			12345678	
4 Date	5 Full name of contributor ut-of-state PAC (ID: Mayo, Jeff	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/25/2014	6 Contributor address; City; State; Zip Code 5220 Hudson Bend Road Austin, TX 78734		\$35.00	[
		<u>-</u>		Texas, complete Schedule T)
9 Principal occup Military	pation / Job title (See Instructions)	10 Employer (See In Texas National		
Date	Full name of contributor ut-of-state PAC (ID#	#)	Amount of	In-kind contribution
	McGrath, Jennifer		contribution (\$)	description (if applicable)
08/16/2014	Contributor address; City; State; Zip Code 713 E 43rd Street Austin, TX 78751		\$250.00	
				Texas, complete Schedule T)
Principal occup Consultant	pation / Job title (See Instructions)	Employer (See Ins Synnex (Concer		
Date	Full name of contributor ut-of-state PAC (ID# McLean, Williams	<u>+</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 2402 Rockmoor Avenue Austin, TX 78703		\$200.00	
D-in-ripel equup				Texas, complete Schedule T)
Lawyer, Partn	ation / Job title (See Instructions) ner	Employer (See Ins McLean and Ho	structions) ward LLC	
Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
]	Miles, Grace		contribution (\$)	description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 1000 San Marcos apt 463 Austin, TX 78702		\$35.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa Sales	ation / Job title (See Instructions)	Employer (See Ins Mtech		
Date	Full name of contributor ut-of-state PAC (ID#	1	A	1 - 1 - 1 - 1 - 1 - 1 - 1
	Monroe, Nicole	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 614 s 1st Street #206 Austin, TX 78704	,.	\$25.00 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occupa Dental hygieni	ation / Job title (See Instructions)	Employer (See Ins Dr. Mark Castor	tructions)	

The Instruction	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 9/	11 Report: 11/42
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Ozer, Robert	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/28/2014	6 Contributor address; City; State; Zip Code 2612 Delwood pl. Austin, TX 78703		\$125.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See In Self	nstructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 150 cr 202 Liberty Hill, TX 78642	••••••••••••••••••••••••••••••••••••••	\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup CEO	oation / Job title (See Instructions)	Employer (See Ir 96 Retreat		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 1300 Riiverside 306C		\$350.00	
	Austin, TX 78741		/if travel outside of	Texas, complete Schedule T)
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-employed		· · · · · · · · · · · · · · · · · · ·
Date	Full name of contributor out-of-state PAC (ID# Schimsk, Ryan	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 6706 Troll Haven Austin, TX 78746		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See In: Self-employed	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Shaughnessy, Holly	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/19/2014	Contributor address; City; State; Zip Code 7008 Choke Cherry Way Littleton, CO 80125		\$350.00 	ı
Principal cases	ation / Joh tille (See January)			Texas, complete Schedule T)
Stay at home	ation / Job title (See Instructions) mom	Employer (See Ins	structions)	

The Instruction	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 10	0/11 Report: 12/42
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT# 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Shaughnessy, Kevin	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/19/2014	6 Contributor address; City; State; Zip Code 7008 Choke Cherry Way Littleton, CO 80125		\$350.00	1
				f Texas, complete Schedule T)
9 Principal occup General Man	pation / Job title (See Instructions) nager	10 Employer (See In: Phil Long Ford		
Date	Full name of contributor ut-of-state PAC (ID# Slater, Brian	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City: State; Zip Code 3600 Greystone Dr Apt 409		\$35.00	I
	Austin, TX 78731	!	. '	1
Dringing occur	C - (1 3 40) - (2 - 1 - 1 - 1 - 1 - 1	<u> </u>		Texas, complete Schedule T)
Realtor	pation / Job title (See Instructions)	Employer (See Ins Realty Austin	structions)	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/25/2014	Contributor address; City; State; Zip Code 3200 Gilbert St. Austin, TX 78703	,	\$100.00	}
	l		(If travel outside of	Texas, complete Schedule T)
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Ins Scott, Douglass,	structions)	
Date	Full name of contributor out-of-state PAC (ID# Stew, Myrick		Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 5400 W Parmer Ln #1923 Austin, TX 78727		\$60.00 \$60.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa Program Direc	ation / Job title (See Instructions) ctor	Employer (See Ins Texas Dept of S		
Date	Full name of contributor ut-of-state PAC (ID# Teekell, Andrew	_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 12602 Oro Valley Cove Austin, TX 78729		\$35.00 	I
Dringing course	# 111 mil (0) 1 to 0			Texas, complete Schedule T)
Principal occupa Planner	ation / Job title (See Instructions)	Employer (See Ins Texas Air Nation		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	1/11 Report: 13/42
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Wachtman, Galen	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/24/2014	6 Contributor address; City; State; Zip Code 2105 Meadowbrook Drive Austin, TX 78703		\$200.00	
Ļ	Daine Standard				Texas, complete Schedule T)
9	Doctor	action / Job title (See Instructions)	10 Employer (See In Breast and Bod	structions) y Center	
	Date	Full name of contributor ut-of-state PAC (ID# Worthy, Alan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/06/2014	Contributor address; City; State; Zip Code 2000 Defense Pentagon		\$100.00	
		Washington, DC 20301	•	(If travel outside of	Texas, complete Schedule T)
	Principal occup Officer	ation / Job title (See Instructions)	Employer (See In US Navy		Texas, complete schedule 1)
	Date	Full name of contributor ut-of-state PAC (ID# Zaitchik, Jesse)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 2114 goodrich avenue unit 7 Austin, TX 78704		\$50.00	
	Dringing accura	office A light Mile (October 1997)			Texas, complete Schedule T)
	Nurse Praction	ation / Job title (See Instructions) ner	Employer (See Ins Beansprout Ped		
	, .				
					1

Employer

Guarantor address; City; State; Zip Code

X not applicable

Principal Occupation

ted into political account		
	Amount Guaranteed (\$)	
	Electronic Filing Version 3.4.6	

Description of Collateral In none GUARANTOR INFORMATION Name of guarantor		Military Check if personal funds were deposited into political account			
					Amount Guaranteed (\$)
				☑ not applicable	Guarantor address; City;
		Principal Occupation		Employer	
			·		

		 		·
The Instruction Gu	IDE explains how to complete this form.		1 PAGE # Schedule: 4/9	9 Report: 17/42
2 FILER NAME P	hillips, Lloyd Jr. (Mr.)		3 ACCOUNT# 12345678	(Ethics Commission filers)
TOTAL OF UN	ITEMIZED LOANS:		·	\$
5 Date of loan 08/16/2014	7 Name of lender out- Phillips, Lloyd Jr. (Mr.)	-of-state PAC (ID#)	9 Loan Amount (\$) \$156.74
6 Is lender a financial Institution?	8 Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	•	•••	10 Interest rate 0 11 Maturity date 08/16/2014
12 Principal occupation US Army	n / Job title (See Instructions)	13 Employer (See Instruct Military	ions)	
14 Description of Colla	teral	15 Check if personal funds	s were deposited into	o political account
			,	
16 GUARANTOR INFORMATION In not applicable	17 Name of guarantor 18 Guarantor address; City: State;	Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupation	n ·	21 Employer		
Date of loan	Name of lender	<u></u>	<u> </u>	Loan Amount (\$)
08/16/2014	Phillips, Lloyd Jr. (Mr.)	of-state PAC (ID#		\$278.16
Is lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 8		Interest rate
No				Maturity date 08/16/2014
Principal occupation US Army	/ Job title (See Instructions)	Employer (See Instructi Military	ons)	
Description of Collat	eral	Check if personal funds	were deposited into	political account
X none		· 🗆		
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
▼ not applicable	Guarantor address; City; State;	Zip Code		
Principal Occupation		Employer		
		<i>'</i>		

Electronic Filing Version 3.4.6

Texas Ethics Commis	ssion P.O.Box 12070 Austin, Te	exas 78711-2070	(512)463-5800	TDD 1-800-735-298
LOANS				SCHEDULE E
	UIDE explains how to complete this form.		1 PAGE # Schedule: 5/9	9 Report: 18/42
	hillips, Lloyd Jr. (Mr.)		3 ACCOUNT # (12345678	(Ethics Commission filers)
TOTAL OF UN	IITEMIZED LOANS:	\$ \$\$\$\$\$\$		\$
5 Date of loan 08/20/2014	7 Name of lender	I-of-state PAC (ID#		9 Loan Amount (\$) \$72.96
6 Is lender a financial Institution?	8 Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 28		10 Interest rate 0
No				11 Maturity date 08/20/2014
US Army	n / Job title (See Instructions)	13 Employer (See Instructi Military	ions)	
14 Description of Collat	teral	15 Check if personal funds	s were deposited into	o political account
none				
16 GUARANTOR INFORMATION	17 Name of guarantor 18 Guarantor address; City; State;			19 Amount Guaranteed (\$)
	, i	Zip Code		
20 Principal Occupation	1	21 Employer		
Date of loan 08/27/2014	Name of lender out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#)	Loan Amount (\$) \$13.48
Is lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 28		Interest rate
No				Maturity date 08/27/2014
Principal occupation US Army	/ Job title (See Instructions)	Employer (See Instruction Military	ions)	
Description of Collate	eral	Check if personal funds	were deposited into	political account
X none				
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
☑ not applicable	Guarantor address; City; State;	Zip Code	· • •	
Principal Occupation		Employer		

Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 LOANS SCHEDULE E 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 6/9 Report: 19/42 2 FILER NAME Phillips, Lloyd Jr. (Mr.) 3 ACCOUNT # (Ethics Commission filers) 12345678 4 **TOTAL OF UNITEMIZED LOANS:** \$ 5 Date of loan Name of lender 9 Loan Amount (\$) ut-of-state PAC (ID# Phillips, Lloyd Jr. (Mr.) 08/29/2014 \$150.00 8 Lender address; City; Is lender a State; Zip Code 10 Interest rate financial Institution? 6001 W. Parmer Lane, Ste. 370 #128 Austin, TX 78727 11 Maturity date No 08/29/2014 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) **US Army** Military 14 Description of Collateral 15 Check if personal funds were deposited into political account □ none **16 GUARANTOR** 17 Name of guarantor 19 Amount Guaranteed (\$) INFORMATION 18 Guarantor address; City; State: Zip Code X not applicable 20 Principal Occupation 21 Employer Date of loan Name of lender ut-of-state PAC (ID#_ Loan Amount (\$) Phillips, Lloyd Jr. (Mr.) 09/02/2014 \$47.23 Is lender a Lender address; City; State; \ Zip Code Interest rate financial Institution? 6001 W. Parmer Lane, Ste. 370 #128 0 Austin, TX 78727 Maturity date No 09/02/2014 Principal occupation / Job title (See Instructions) Employer (See Instructions) **US Army** Military Description of Collateral Check if personal funds were deposited into political account X none **GUARANTOR** Name of guarantor Amount Guaranteed (\$) INFORMATION Guarantor address; City; State; Zip Code x not applicable Principal Occupation Employer

			00/11/2014	
Principal occupation / Job title (See Instructions) US Army Description of Collateral		Employer (See Instructions) Military		
		Check if personal funds were deposite		
none				
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)	
X not applicable	Guarantor address; City; Sta	ate; Zip Code		
Principal Occupatio	n	Employer		
	·			

SCHEDULE F

Advertising Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract La

Accounting/Bani Consulting Expe Event Expense Fees	rnse Food/Beverage Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
. 51.05 "		UIDE explains how to complete this fo	лт
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 1/20 F		r-)	12345678
4 Date	5 Payee name		
09/12/2014	219 West		
6 Amount (\$)	7 Payee address City; State;	Zip Code	
\$103.26	612 W 6th St Austin, TX 78701		
8 PURPOSE OF	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule) (b) Description Fundraising	(If travel outside of Texas, complete Schedule T) event
EXPENDITURE		_	
2.0	0 11/1	Check if Austir	, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ght: Office held:
Date	Payee name		
09/17/2014	Apple Store		
Amount (\$)	Payee address City; State;	Zip Code	·
\$914.71	11410 Century Oaks Terrace Austin, TX 78758-8694		
	Category (See Categories listed at the top of	this schedule) Description	(If travel outside of Texas, complete Schedule T)
PURPOSE OF	OTHER - Computer equipment	MBAIR 11.6	laptop
EXPENDITURE			
	<u> </u>	Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	
Date	Payee name		
09/18/2014	Austin Parking Meters	•	
Amount (\$)	Payee address City State;	Zin Code	·
\$1.25	PO Box 1088 Austin, TX 78767-1088		
	Category (See Categories listed at the top of	his schedule) Description	(If travel outside of Texas, complete Schedule T)
PURPOSE OF	Travel in District	Parking meter	St.
EXPENDITURE			
	_	Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	
Date	Payee name		
09/25/2014	Austin Parking Meters		
Amount (\$)	Payee address City, State;	Zip Code	
\$1.00	PO Box 1088	· · · · · · · · · · · · · · · · · · ·	
Ψ1.00	Austin, TX 78767-1088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of t Travel In District	his schedule) Description parking mete	(If travel outside of Texas, complete Schedule T)
0	C		TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder пате	Office sou	ght: Office held:

SCHEDULE F

Event Expense

to benefit C/OH

EXPENDITURE CATEGORIES Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Legal Services
Food/Beverage Expense Transportation Equipment & Related Expense Contributions/Donations Made By Travel In District Polling Expense Travel Out Of District Office Overhead/Rental Expense Candidate/Officeholder/Political Committee Printing Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 2/20 Report: 24/42 12345678 4 Date 5 Payee name 07/15/2014 Compass Bank 6 Amount (\$) Payee address City; State; Zip Code 4100 N. Lamar Blvd. Austin, TX 78756-3716 \$136.74 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Banking fees 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 08/15/2014 Compass Bank Amount (\$) Payee address City; State; Zip Code 4100 N. Lamar Blvd. \$46.89 Austin, TX 78756-3716 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Banking fees Accounting/Banking 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 Payee name 09/15/2014 Compass Bank Amount (\$) Payee address City; State; Zip Code \$46.89 4100 N. Lamar Blvd. Austin, TX 78756-3716 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Banking fees Accounting/Banking 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 09/10/2014 Cover 3 Amount (\$) Payee address City; State; Zip Code 2700 W Anderson Ln #202 Austin, TX 78757 \$80.00 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Food/Beverage Expense Campaign strategy mtg - JS, CH, JS, PP **EXPENDITURE** Check If Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	_
AGE #	-
edule: 3/20 Report: 25	:

	EXPENDITURE CATEG	ORIES
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense Salaries/Wages/Citing Legal Services Solicitation/Fundra	ontract Labor Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officebolder/Reliting/Committee
	The Instruction Guide explains how	to complete this form.
1 PAGE# Schedule: 3/20 F	2 FILER NAME	3 ACCOUNT# (TEC filers
4 Date	5 Payee name	12345678
08/07/2014	DiscountMugs.com	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$137.48	12610 NW 115 Ave Medley, FL 33178	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Advertising Expense	Pete Phillips for District 6 t-shirts
EXPENDITURE		
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense
direct expenditure to benefit C/OH	Sandidate / Officerialities frame	Office sought: Office held:
Date	Рауее пате	
07/29/2014	Facebook	
Amount (\$)	Payee address City; State; Zip Code	
\$25.20	1601 Willow Rd Menlo Park, CA 94025	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Facebook ad
EXPENDITURE		<u> </u>
Complete ONLY	Condidate (Official all	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	
08/01/2014	Facebook	
Amount (\$)	Payee address City; State; Zip Code	
\$41.17	1601 Willow Rd Menlo Park, CA 94025	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF OF	Advertising Expense	Facebook ad
EXPENDITURE		<u> </u> _
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH		Office reid.
Date	Payee name	
08/11/2014	Facebook	
Amount (\$)	Payee address City; State; Zip Code	
\$25.18 	1601 Willow Rd Menlo Park, CA 94025	
PUPPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Facebook ad
EXPENDITURE		
Complete CNI V	Candidate / Officeholder	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE E

		33112322
Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services Solicitation/Funder	Contract Labor aising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Rental Expense Contract Co
1 PAGE # Schedule: 4/20 f	Report: 26/42 Phillips, Lloyd Jr. (Mr.)	3 ACCOUNT # (TEC filers) 12345678
4 Date	5 Payee name	
09/02/2014	Facebook	
6 Amount (\$) \$32.21	7 Payee address City; State; Zip Code 1601 Willow Rd 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 outside of Texas, complete Schedule T) Facebook ad
A Complete ONLY	Conditate (Office 1)	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 09/02/2014	Payee name Facebook	
Amount (\$)	Payee address City; State; Zip Code	
\$1.12	1601 Willow Rd Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 09/02/2014	Payee name FTD.com	
Amount (\$)	Payee address City; State; Zip Code	
\$79.36 	3113 Woodcreek Drive Downers Grove, IL 60515	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) Thank-you flowers for fundraising party - Lutz
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
07/06/2014	Grasshopper.com	
Amount (\$)	Payee address City; State; Zip Code	
\$30.32	197 1st Avenue, Suite 200 Needham, MA 02494	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) Usage - volunteers using personal phones for calling
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

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

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Event Expense Fees	Polling Expense Travel Out Of D Printing Expense Office Overhead	istrict Candidate/Officeholder/Political Com d/Rental Expense OTHER (enter a category not listed abo	mittee ve)
	The Instruction Guide explains ho	ow to complete this form.	•••,
1 PAGE#	2 FILER NAME	3 ACCOUNT# (T	EC filers)
Schedule: 5/20 I		12345678	- ,
4 Date 08/03/2014	5 Payee name Grasshopper.com		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$50.00	• • • • • • • • • • • • • • • • • • • •		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Sche Usage - volunteers use personal cells to phon Check if Austin, TX, officeholder living expense	dule T) 🔲 nebank
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	
Date	Payee name		
09/06/2014	Grasshopper.com		
Amount (\$)	Payee address City; State; Zip Code		
\$40.32	197 1st Avenue, Suite 200 Needham, MA 02494		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schel Usage - volunteers use personal cells for photobanking Check if Austin, TX, officeholder living expense	dule T)
			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	
direct expenditure	Candidate / Officeholder name Payee name		<u> </u>
direct expenditure to benefit C/OH			
direct expenditure to benefit C/OH Date	Payee name Greystar Media		
direct expenditure to benefit C/OH Date 07/27/2014	Payee name Greystar Media		
direct expenditure to benefit C/OH Date 07/27/2014 Amount (\$)	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801		dule T)
Date 07/27/2014 Amount (\$) \$2,080.65	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule) Consulting Expense	Office sought: Office held: Description (If travel outside of Texas, complete Scheol 7/14 & 8/14 Consulting services - contractual	dule T)
Date 07/27/2014 Amount (\$) \$2,080.65	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule)	Office sought: Office held: Description (If travel outside of Texas complete School	dule T)
direct expenditure to benefit C/OH Date 07/27/2014 Amount (\$) \$2,080.65 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule) Consulting Expense Candidate / Officeholder name	Office sought: Office held: Description (If travel outside of Texas, complete Sched 7/14 & 8/14 Consulting services - contractual Check if Austin, TX, officeholder living expense	dule T)
direct expenditure to benefit C/OH Date 07/27/2014 Amount (\$) \$2,080.65 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule) Consulting Expense Candidate / Officeholder name	Office sought: Office held: Description (If travel outside of Texas, complete Sched 7/14 & 8/14 Consulting services - contractual Check if Austin, TX, officeholder living expense	dule T)
direct expenditure to benefit C/OH Date 07/27/2014 Amount (\$) \$2,080.65 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule) Consulting Expense Candidate / Officeholder name Payee name Greystar Media	Office sought: Office held: Description (If travel outside of Texas, complete Sched 7/14 & 8/14 Consulting services - contractual Check if Austin, TX, officeholder living expense	dule T)
direct expenditure to benefit C/OH Date 07/27/2014 Amount (\$) \$2,080.65 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule) Consulting Expense Candidate / Officeholder name Payee name Greystar Media	Office sought: Office held: Description (If travel outside of Texas, complete Sched 7/14 & 8/14 Consulting services - contractual Check if Austin, TX, officeholder living expense	dule T)
direct expenditure to benefit C/OH Date 07/27/2014 Amount (\$) \$2,080.65 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$)	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule) Consulting Expense Candidate / Officeholder name Payee name Greystar Media Payee address City; State; Zip Code PO Box 801	Description (If travel outside of Texas, complete Sched 7/14 & 8/14 Consulting services - contractual Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Sched Salesforce subscription - early termination	
direct expenditure to benefit C/OH Date 07/27/2014 Amount (\$) \$2,080.65 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$) \$787.02	Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule) Consulting Expense Candidate / Officeholder name Payee name Greystar Media Payee address City; State; Zip Code PO Box 801 Austin, TX 78767 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Sched 7/14 & 8/14 Consulting services - contractual Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Sched	

SCHEDULE F

Advertising Expense

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement

Consulting Expe Event Expense Fees	ense Food/Beverage Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Guide explains how to complete this	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) form.
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 6/20 F	Report: 28/42 Phillips, Lloyd Jr. (I	Mr.)	12345678
4 Date	5 Payee name		1 120-10010
08/19/2014	Gross, Chris		
6 Amount (\$)	7 Payee address City; State;	Zip Code	
\$472.00	4200 Ave A #202 Austin, TX 78751		
8	(a) Category (See Categories listed at the top		
PURPOSE OF	Printing Expense	Business	cards
EXPENDITURE			
5 3 I to 6 htt 2 %			itin, TX, officeholder tiving expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office s	
Date	Payee name		
09/17/2014	Home Depot		
Amount (\$)	Payee address City; State;	Zip Code	
\$85.00	10515 N Mopac Expy Austin, TX 78759		
PURPOSE OF	Category (See Categories listed at the top of Advertising Expense		(If travel outside of Texas, complete Schedule T) pr hanging signs
EXPENDITURE		ln	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	tin, TX, officeholder living expense ought: Office held:
Date	Payee name		
09/16/2014	Jardin Corona		
Amount (\$)	Payee address City; State;	Zip Code	
\$55.27	13233 Pond Springs Road Austin, TX 78728	21p 000e	
PURPOSE OF	Category (See Categories listed at the top o Food/Beverage Expense	of this schedule) Description Pete for Au	(If travel outside of Texas, complete Schedule T)
EXPENDITURE		<u> _</u>	
		Check if Aust	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	
Date	Payee name		
08/18/2014	Jason's Deli		
Amount (\$)	Payee address City; State;	Zip Code	
\$327.64	10225 Research Blvd. Austin, TX 78759		
PURPOSE OF	Category (See Categories listed at the top o Food/Beverage Expense	of this schedule) Description Food for Lu	(If travel outside of Texas, complete Schedule T)
EXPENDITURE		ln	•
Complete ONLY if	Candidate / Officeholder name		in, TX, officeholder living expense
direct expenditure	Canadate / Onicendide hame	Office so	ought: Office held:

SCHEDULE F

	EXPENDITURE CATE	GORIES
Advertising Expe Accounting/Banl Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense Salaries/Wages king Legal Services Solicitation/Fun- ense Food/Beverage Expense Travel I Dustric Polling Expense Travel Out Of D Printing Expense Office Overhead	s/Contract Labor draising Expense ct draising Expense draising Expense draising Expense contributions/Donations Made By Candidate/Officeholder/Political Committee d/Rental Expense
	The Instruction Guide explains ho	ow to complete this form.
1 PAGE # Schedule: 7/20 F	2 FILER NAME	3 ACCOUNT # (TEC filers) 12345678
4 Date	5 Payee name	12340070
08/20/2014	Miller's Professional Imaging	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$72.96	PO Box 777 Pittsburg, KS 66762	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Gifts/Awards/Memorials Expense	Photo donation to TAG anniversary party
EXPENDITURE		
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense
direct expenditure to benefit C/OH	Candidate / Officeriologi flame	Office sought: Office held:
Date	Payee name	
09/17/2014	Miller's Professional Imaging	
Amount (\$)	Payee address City; State; Zip Code	
\$4 30.09	PO Box 777 Pittsburg, KS 66762	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Gifts/Awards/Memorials Expense	Thank-you portrait - Al Koehler fundraising party
EXPENDITURE		
2 22 20 20 20 20 20 20 20 20 20 20 20 20		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	
07/29/2014	Name Badges International	
Amount (\$)	Payee address City; State; Zip Code	
\$27.97	1500 N.E. 131 Street Miami, FL 33161	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Name badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
07/03/2014	NationBuilder	
Amount (\$)	Payee address City; State; Zip Code	
\$199.00	448 S. Hill St. #200 Las Angeles, LA 90013	
BUBBOOF	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Solicitation/Fundraising Expense	Monthly subscription - database to target voters
EXPENDITURE	·	
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Services Solicitation nse Food/Beverage Expense Travel Int Polling Expense Travel Out Printing Expense Office Ove The INSTRUCTION GUIDE explain	t Of District Candidate/Officeholder/Political Committee orhead/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 8/20 F	Report: 30/42 Phillips, Lloyd Jr. (Mr.)	12345678
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·
08/03/2014	NationBuilder	
6 Amount (\$)	7 Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
\$199.00	448 S. Hill St. #200 Las Angeles, LA 90013	
8	(a) Category (See Categories listed at the top of this schedule	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Solicitation/Fundraising Expense	Monthly subscription - voter targeting database
EXPENDITURE		
O Complete ONLY	Condidate (Official and	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	Payee name	
09/04/2014	NationBuilder	
Amount (\$)	Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
\$199.00	448 S. Hill St. #200 Las Angeles, LA 90013	
PURPOSE	Category (See Categories listed at the top of this schedule	
OF	Solicitation/Fundraising Expense	Database for targeting voters
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense
direct expenditure to benefit C/OH	Canadate / Officerologi Hame	Office sought: Office held:
Date	Payee name	
07/28/2014	North by Northwest	
Amount (\$)	Payee address City; State; Zip Code	
\$121.91	10010 N Capital of Texas Hwy Austin, TX 78759	·
PURPOSE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Campaign volunteer dinner
OF 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	
08/16/2014	Oak Liquor Cabinet	·
Amount (\$)	Payee address City; State; Zip Code	
\$156.74	12636 Research Blvd Austin, TX 78759	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Supplies for Matt Lutz fundraising party
EXPENDITURE		Charlett Austra Training and a second
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	king Legal Services Solicitation nse Food/Beverage Expense Travel In E Polling Expense Travel Out Printing Expense Office Ove	Vages/Contract Labor n/Fundraising Expense District t Of District chead/Rental Expense ns how to complete this form. Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 9/20 R	Report: 31/42 Phillips, Lloyd Jr. (Mr.)	12345678
4 Date	5 Payee name	
08/16/2014	Oak Liquor Cabinet	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$278.16	12636 Research Blvd Austin, TX 78759	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Supplies for Matt Lutz fundraising party
EXPENDITURE		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	Payee name	
<u>07</u> /17/2014	Office Max	
Amount (\$)	Payee address City; State; Zip Code	
\$25.06	2601 S. Interstate Hwy 35 Round Rock, TX 78665	
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) Supplies
EXPENDITURE		
CI-I- ONLY 4	0 84-4 100 1 1	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	
08/27/2014	Office Max	
Amount (\$)	Payee address City; State; Zip Code	
\$27.05	2601 S. Interstate Hwy 35 Round Rock, TX 78665	
PURPOSE '	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense) Description (If travel outside of Texas, complete Schedule T) labels
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
	B	
Date 07/01/2014	Payee name Piryx	
07/01/2014		
Amount (\$)	Payee address City; State; Zip Code	
\$0.58	144 2nd St. 1st Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) Piryx processing fees
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES 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

Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 10/20 Report: 32/42 12345678 4 Date 5 Payee name 07/02/2014 Piryx 6 Amount (\$) Pavee address City; State: Zip Code 144 2nd St. 1st Floor \$1,44 San Francisco, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees 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 07/03/2014 Piryx Amount (\$) Payee address Zip Code City: State: 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees 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 07/06/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Piryx processing fees Accounting/Banking 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 07/15/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$2.01 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees 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

SCHEDULE F

Advertising Expense Accounting/Banking Event Expense

to benefit C/OH

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

EXPENDITURE CATEGORIES 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) Consulting Expense Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 11/20 Report: 33/42 12345678 Date 5 Payee name Piryx 07/19/2014 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$40.25 San Francisco, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees 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 07/21/2014 Piryx Amount (\$) Payee address City; State: Zip Code 144 2nd St. 1st Floor \$29.00 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Piryx processing fees Accounting/Banking **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 Pavee name 07/22/2014 Piryx Amount (\$) Payee address State; City; Zip Code 144 2nd St. 1st Floor \$3,45 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Piryx processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/QH Date Рауее пате 07/25/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Piryx processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Event Expense

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

EXPENDITURE CATEGORIES 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 Consulting Expense 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. PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 12/20 Report: 34/42 12345678 4 Date 5 Payee name 07/26/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees 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 07/28/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$7.19 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 07/30/2014 Piryx Amount (\$) Payee address State; City; Zip Code 144 2nd St. 1st Floor \$20.13 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 08/05/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$2.01 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees 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

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES

SCHEDULE F

			
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	king Legal Services Solicitation/Fun ense Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	s/Contract Labor Loa ndraising Expense Tra ct Cor District (otd/Rental Expense OTI	an Repayment/Reimbursement ansportation Equipment & Related Expense intributions/Donations Made By Candidate/Officeholder/Political Committee THER (enter a category not listed above)
1 PAGE #	2 FILER NAME	An to possible on the control	3 ACCOUNT# (TEC filers)
Schedule: 13/20			12345678
4 Date	5 Payee name		
08/14/2014	Piryx		
6 Amount (\$) \$20.13	7 Payee address City; State; Zip Code 144 2nd St. 1st Floor San Francisco, CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Piryx processing	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	officeholder living expense Office held:
Date	Payee name		
08/16/2014	Piryx		
Amount (\$)	Payee address City: State; Zip Code		
\$25.88	144 2nd St. 1st Floor San Francisco, CA 94105	٠	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If trav Piryx processing t	evel outside of Texas, complete Schedule T) [
EXPENDITURE	1	Charless Austin TX	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	officeholder living expense Office held:
Date 08/20/2014	Payee name Piryx		
Amount (\$)	Payee address City; State; Zip Code		
\$3.45	144 2nd St. 1st Floor San Francisco, CA 94105		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Piryx processing f	
Complete ONLY if	Candidate / Officeholder name		officeholder living expense
direct expenditure to benefit C/OH	Candidate / Onicendider name	Office sought:	Office held:
Date	Payee name		
08/25/2014	Piryx		
Amount (\$) \$2.01	Payee address City; State; Zip Code 144 2nd St. 1st Floor San Francisco, CA 94105		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Piryx processing for	·
		Check if Austin, TX, o	officeholder living expense

Office held:

Office sought:

SCHEDULE F

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

EXPENDITURE CATEGORIES 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 Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 14/20 Report: 36/42 12345678 4 Date 5 Payee name 08/29/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$20.13 San Francisco, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees 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 09/08/2014 Рігух Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$11.50 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Piryx processing fees Accounting/Banking 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 09/15/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$20.13 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Piryx processing fees Accounting/Banking 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 09/17/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$59.81 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx processing fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

Description

Piryx processing fees

Office sought:

Check if Austin, TX, officeholder living expense

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

Accounting/Banking

Candidate / Officeholder name

PURPOSE

EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

(If travel outside of Texas, complete Schedule T)

Office held:

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement

Consulting Expe Event Expense Fees	Polling Expense Printing Expense	Travel in District Travel Out Of District	Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT# (TEC filers)
Schedule: 16/20			12345678
4 Date	5 Payee name		12343676
07/14/2014	Plucker's		
6 Amount (\$)	7 Payee address City; State; Zi	Code	
\$52.51	11066 Pecan Park Blvd Cedar Park, TX 78613		
8 PURPOSE	(a) Category (See Categories listed at the top of this		travel outside of Texas, complete Schedule T)
OF	Food/Beverage Expense	Campaign mtg	- PP, TB, NW
EXPENDITURE		<u> _</u>	
9 Complete ONLY if	Condidate LOSS - L. L.	Check if Austin, T	X, officeholder living expense
direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	t: Office held:
Date	Payee name		
09/02/2014	Plucker's		
Amount (\$)	Payee address City; State; Zig	Code	· · · · · · · · · · · · · · · · · · ·
\$47.23	11066 Pecan Park Blvd Cedar Park, TX 78613		
PURPOSE	Category (See Categories listed at the top of this		travel outside of Texas, complete Schedule T)
OF	Food/Beverage Expense	Pete for Austin	нн —
EXPENDITURE		Observation To	
Complete ONLY if	Candidate / Officeholder name	Office sought	K, officeholder living expense Office held:
direct expenditure to benefit C/OH			Office field.
Date	Payee name		
09/17/2014	Premium Parking Service, LLC		
Amount (\$)	Payee address City; State; Zip	Code	
\$7.50	1010 Common Street, Suite 2950 New Orleans, LA 70112		
2112222	Category (See Categories listed at the top of this	schedule) Description (If t	ravel outside of Texas, complete Schedule T)
PURPOSE	Travel In District	Downtown park	ing
EXPENDITURE			
		Check if Austin, TX	C, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	
Date	Payee name		
09/05/2014	Rasmussen Consulting, LLC		
Amount (\$)	Payee address City, State; Zip	Code	
\$270.00	PO Box 92632		
\$270.00	Austin, TX 78717		
	Category (See Categories listed at the top of this	schedule) Description (If to	ravel outside of Texas, complete Schedule T)
PURPOSE OF	Consulting Expense	8/14 consulting	
EXPENDITURE	·	1	
		Check if Austin. TX	, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	

SCHEDULE F

	EXPENDITURE CATE	
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Services Solicitation/Func ense Food/Beverage Expense Travel In District Polling Expense Travel Out Of Di	istrict Candidate/Officeholder/Political Committee d/Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 17/20	Report: 39/42 FILER NAME Phillips, Lloyd Jr. (Mr.)	3 ACCOUNT# (TEC filers 12345678
4 Date	5 Payee name	120 10010
09/22/2014	Roaring Fork	
6 Amount (\$) \$59.80	Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Pete for Dist 6 HH
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 08/08/2014	Payee name Staples	
Amount (\$) \$43.88	Payee address City; State; Zip Code 4301 W William Cannon Dr #500 Austin, TX 78749	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) Office supplies Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 09/03/2014	Payee name Stratton, Jennifer	
Amount (\$)	Payee address City; State; Zip Code	
\$1,500.00	11405 Dog Leg Drive Austin, TX 78717	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) 9/14 consulting services 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	
08/07/2014	Super Cheap Signs	
Amount (\$) \$712.58	Payee address City; State; Zip Code 9804 Gray Blvd Austin, TX 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

\$54.03

Amount (\$)

\$19.46

10107 Research Blvd Austin, TX 78759

Payee address

Austin, TX 78759

8650 Spicewood Springs #145

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fun ise Food/Beverage Expense Travel In District Polling Expense Travel Out of D	s/Contract Labor Loa draising Expense Trai ct Con listrict C df/Rental Expense OTI	n Repayment/Reimbursement nsportation Equipment & Related Expense tributions/Donations Made By Candidate/Officeholder/Political Committee HER (enter a category not listed above)
1 PAGE#	2 FILER NAME		A ACCOUNT # /TEO El
Schedule: 18/20			3 ACCOUNT # (TEC filers)
4 Date	5 Payee name		12345678
09/12/2014	Super Cheap Signs		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$673.65	9804 Gray Blvd Austin, TX 78758	•	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Signage	vel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	officeholder living expense Office held:
Date	Payee name		
09/12/2014	Super Cheap Signs		
Amount (\$)	Payee address City; State; Zip Code		
\$307.70	9804 Gray Blvd Austin, TX 78758		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Signage	rel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	fficeholder living expense Office held:
Date	Payee name		
07/29/2014	Target		
Amount (\$)	Payee address City; State; Zip Code		

Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense Supplies 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 Payee name 09/11/2014 The Mail Store

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Office Overhead/Rental Expense

Complete ONLY if direct expenditure to benefit C/OH

Category (See Categories listed at the top of this schedule)
Office Overhead/Rental Expense

Check if Austln, TX, officeholder living expense

Office sought:
Office held:

City; State; Zip Code

SCHEDULE F

			<u> </u>			
Advertising Exp Accounting/Banl Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense king Legal Services rinse Food/Beverage Expense Polling Expense Printing Expense	DITURE CATEGO Salaries/Wages/Con Solicitation/Fundraisi Travel In District Travel Out Of District Office Overhead/Rer Guide explains how to	tract Labor ing Expense t ntal Expense	Transportation E Contributions/Do Candidate/Off OTHER (enter a	nt/Reimbursement Equipment & Related onations Made By ficeholder/Political C category not listed a	ommittee
1 PAGE#	2 FILER NAME				3 ACCOUNT#	(TFC filers)
Schedule: 19/20	Report: 41/42 Phillips, Lloyd Jr. (Mi	lr.)			12345678	(120 11010)
4 Date	5 Payee name					
09/02/2014	Twin Liquors					
6 Amount (\$)	7 Payee address City; State;	Zip Code				
\$131.20 	11637 Research Blvd. Austin, TX 78759					
8 PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description	(If travel outside of	f Texas, complete Se	chedule T)
OF	Food/Beverage Expense		Wine for Bob	Almond introd	luction party	, F
EXPENDITURE			_			
9 Complete ONLY if	Candidate / Officeholder name			TX, officeholder	living expense	
direct expenditure to benefit C/OH	Carloidate / Officenoider name	<u> </u>	Office soug	,ht: 	Office held:	
Date	Payee name					
08/27/2014	Upper Crust Bakery					
Amount (\$)	Payee address City; State;	Zip Code	<u> </u>			
\$13.48. 	4508 Burnet Road Austin, TX 78756					
PURPOSE	Category (See Categories listed at the top of	this schedule)	Description (If travel outside of	Texas, complete So	hedule T)
OF	Food/Beverage Expense		Campaign stra	ategy mtg w/ J	IS	· / 🚨
EXPENDITURE			_			
Complete ONLY if	Condidate / Office half			TX, officeholder I	living expense	
direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht:	Office held:	
Date	Payee name	-				
07/09/2014	Verizon Wireless					
Amount (\$)		Zip Code	·			
\$110.00	PO BOX 660108 Dallas, TX 75266-0108					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of the Office Overhead/Rental Expense	this schedule)	Description (I PP campaign	f travel outside of mobile phone	Texas, complete Sc	hedule T)
			Check if Austin,	TX. officeholder I	iving expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough		Office held:	
Date	Payee name					
08/01/2014	Verizon Wireless					
Amount (\$)	Payee address City; State;	Zip Code				
\$91.16	PO BOX 660108 Dallas, TX 75266-0108					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of the Office Overhead/Rental Expense	his schedule)	Description (II PP campaign I	I travel outside of I mobile phone	Texas, complete Sch	nedule T)
		l _r	Check if Austin, T	TV officebalds : "	tratara.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough		Office held:	