

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

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

**2 PAGE #**  
1 of 47

**3 CANDIDATE /  
OFFICEHOLDER  
NAME**

MS / MRS / MR FIRST MI  
Mr. James

NICKNAME LAST SUFFIX  
Jimmy Flannigan

**OFFICE USE ONLY**

Date Received

2014 OCT 6 PM 4:37  
AUSTIN CITY CLERK  
RECEIVED

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

**4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS**

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

8601 Anderson Mill Rd  
#1023  
Austin, TX 78729

☐ Change of Address

**5 CAMPAIGN  
TREASURER  
NAME**

MS / MRS / MR FIRST MI  
Mrs. Lisa

NICKNAME LAST SUFFIX  
Gaynor

**6 CAMPAIGN  
TREASURER  
ADDRESS**  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

10901 Leafwood Ln  
Austin, TX 78750

**7 CAMPAIGN  
TREASURER  
PHONE**

AREA CODE PHONE NUMBER EXTENSION

(512) 658-0636

**8 REPORT TYPE**

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

**9 PERIOD  
COVERED**

Month Day Year Month Day Year

07/01/2014 THROUGH 09/25/2014

**10 ELECTION**

ELECTION DATE ELECTION TYPE

Month Day Year ☐ Primary ☐ Runoff ☒ General ☐ Special

11/04/2014

**11 OFFICE**

OFFICE HELD (if any)

**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

13 C/OH NAME Flannigan, James (Mr.)

14 ACCOUNT # (Ethics Commission filers)  
0062947815 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages16 CONTRIBUTION  
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 13,216.99

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 20,305.61

CONTRIBUTION  
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

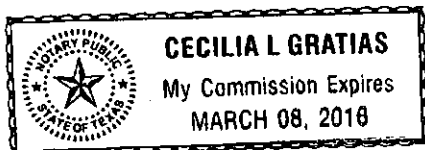
\$ 9,429.29

OUTSTANDING  
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 150.00

## 17 AFFIDAVIT

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



*[Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JAMES TIMOTHY FLANNIGAN, this the 6<sup>th</sup> day of OCTOBER, 20 14, to certify which, witness my hand and seal of office.

*Cecilia L Gratias*  
Signature of officer administering oath

CECILIA L GRATIAS  
Print name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/25 Report: 3/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abrams, John  6 Contributor address; City; State; Zip Code 10008 Barbrook Dr Austin, TX 78726	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  09/23/2014	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID# C00011114) AFSCME PEOPLE PAC  Contributor address; City; State; Zip Code 1625 L St NW Washington, DC 20036	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arnold, Jeffrey  Contributor address; City; State; Zip Code 501 Sinuso Dr Georgetown, TX 78628	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Travis County EMS Employees Association PAC  Contributor address; City; State; Zip Code 5817 Wilcab Rd Ste 3 Austin, TX 78721	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baccus, Richard  Contributor address; City; State; Zip Code 11504 Oakwood Dr Austin, TX 78753	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) ABC Vacuum Warehouse	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 2/25 Report: 4/47	
2 FILER NAME Flannigan, James (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Rich  6 Contributor address; City; State; Zip Code P.O. Box 2062 Austin, TX 78768		7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Government Relations			10 Employer (See Instructions) City of Austin		
Date  09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ballew, Scott  Contributor address; City; State; Zip Code 5126 English Glade Dr Austin, TX 78724		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Program Manager			Employer (See Instructions) Sapling Learning		
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, Terry  Contributor address; City; State; Zip Code 11902 Aloe Vera Trail Austin, TX 78750		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  07/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barton, John  Contributor address; City; State; Zip Code 5212 Moon Shadow Dr Austin, TX 78735		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Budget Analyst			Employer (See Instructions) Legislative Budget Board		
Date  09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bell, Doug  Contributor address; City; State; Zip Code 9202 Cedar Crest Dr Austin, TX 78750		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Engineer			Employer (See Instructions) Retired		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 3/25 Report: 5/47	
2 FILER NAME Flannigan, James (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Billig, Jay		7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 806 Bouldin Ave Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) Entrepreneur			10 Employer (See Instructions) Self-Employed		
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bingman, Rebecca		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 10501 Hard Rock Rd Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Arts Consultant			Employer (See Instructions) Unemployed		
Date  09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bingman, Rebecca		Amount of contribution (\$)  \$17.00	In-kind contribution description (if applicable) wire frame mounts for yard signs	
Contributor address; City; State; Zip Code 10501 Hard Rock Rd Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Arts Consultant			Employer (See Instructions) Unemployed		
Date  09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackson, Steve		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 9803 Mandeville Circle Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Landscape Design			Employer (See Instructions) Windy Point Garden Railroads		
Date  07/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blythe, Sharon		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 9206 Brigadoon Cv Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 4/25 Report: 6/47	
2 FILER NAME Flannigan, James (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  07/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Ashley Thomas		7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)	
		6 Contributor address; City; State; Zip Code 505 E Annie St Austin, TX 78704			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Vice President			10 Employer (See Instructions) Spredfast		
Date  09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Garry		Amount of contribution (\$)  \$109.21	In-kind contribution description (if applicable) room fee, food/bev for fundraiser	
		Contributor address; City; State; Zip Code 1401 Enfield #104 Austin, TX 78703			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Community Outreach Director			Employer (See Instructions) Travis County		
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryan, Deb		Amount of contribution (\$)  \$75.00	In-kind contribution description (if applicable)	
		Contributor address; City; State; Zip Code 2303 Alta Vista Ave Austin, TX 78704			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryant, Suzanne		Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)	
		Contributor address; City; State; Zip Code 1500 W 24th St Austin, TX 78703			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Self-Employed			Employer (See Instructions) Law Office of Suzanne Bryant		
Date  07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buchanan, Jim		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)	
		Contributor address; City; State; Zip Code 9000 Bubbling Springs Trail Austin, TX 78729			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Postal Uniform Sales			Employer (See Instructions) Self-Employed		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/25 Report: 7/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  07/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Canon, Todd  6 Contributor address; City; State; Zip Code 804 Pressler St Austin, TX 78703	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Family Physician		10 Employer (See Instructions) South Austin Medical Clinic	
Date  09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cavanaugh, Nina  Contributor address; City; State; Zip Code 6402 McNeil Dr #17 Austin, TX 78729	Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cherico, Patricia  Contributor address; City; State; Zip Code 6007 Bullard Dr Austin, TX 78757	Amount of contribution (\$)  \$125.00	In-kind contribution description (if applicable) food and beverage for campaign video rehearsal and shoot; shipping fee for equipment (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired	
Date  09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Rebecca  Contributor address; City; State; Zip Code 14317 Alderminster Lane Pflugerville, TX 78660	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Licensed Massage Therapist		Employer (See Instructions) Self-Employed	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coleman, Eugene  Contributor address; City; State; Zip Code 9550 Savannah Ridge Dr Unit 19 Austin, TX 78726	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/25 Report: 8/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Comer, Jim  6 Contributor address; City; State; Zip Code 12505 Turkey Ridge Court Austin, TX 78729	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Speaker/Writer/Speech Coach		10 Employer (See Instructions) Self-Employed	
Date  08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cook, Amy  Contributor address; City; State; Zip Code 1514 Corona Dr Austin, TX 78723	Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed	
Date  09/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cook, Amy  Contributor address; City; State; Zip Code 1514 Corona Dr Austin, TX 78723	Amount of contribution (\$)  \$35.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed	
Date  09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cook, Terry  Contributor address; City; State; Zip Code 3116 GoldenOak Circle Round Rock, TX 78681	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Property Stagers		Employer (See Instructions) Staging Designs for Now	
Date  09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cook, Terry  Contributor address; City; State; Zip Code 3116 GoldenOak Circle Round Rock, TX 78681	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Property Stagers		Employer (See Instructions) Staging Designs for Now	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/25 Report: 9/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  07/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Gary  6 Contributor address; City; State; Zip Code 4907 Bull Mountain Cv Austin, TX 78746	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions) Retired	
Date  09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Covey, Jerry  Contributor address; City; State; Zip Code 255 Whispering Wind Georgetown, TX 78633	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  08/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cunningham, Leslie  Contributor address; City; State; Zip Code 11310 Spicewood Club Dr #2 Austin, TX 78750	Amount of contribution (\$)  \$30.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired	
Date  07/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Dale  Contributor address; City; State; Zip Code 9705 Mountain Quail Rd Austin, TX 78758	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DasGupta, Sumit  Contributor address; City; State; Zip Code 8900 Bluegrass Dr Austin, TX 78759	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired SVP, Engineering		Employer (See Instructions) Silicon Integration Initiative, Inc	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/25 Report: 10/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  08/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Larry  6 Contributor address; City; State; Zip Code 7104 Seneca Cir Austin, TX 78736	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Oilcan Harry's	
Date  07/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Desai, Vivek  Contributor address; City; State; Zip Code 11516 Running Brush Ln Austin, TX 78717	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) National Instruments	
Date  09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doucette, John  Contributor address; City; State; Zip Code 1406 Willow St Austin, TX 78702	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed	
Date  07/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Driscoll, Dan  Contributor address; City; State; Zip Code 503 Swanee Dr #17 Austin, TX 78752	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  08/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eason, Patty  Contributor address; City; State; Zip Code 1401 S College St Georgetown, TX 78626	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Community Activist		Employer (See Instructions) N/A	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/25 Report: 11/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Emmer, Carol  6 Contributor address; City; State; Zip Code 8901 Fairway Hill Dr Austin, TX 78750	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) English, Linda  Contributor address; City; State; Zip Code 9912 Cinnabar Trail Austin, TX 78726	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) N/A	
Date  08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Engstrand, Alfred  Contributor address; City; State; Zip Code 6815 DePaul Cv Austin, TX 78723	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Caterer		Employer (See Instructions) Alfred's Catering	
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erwin, Mark  Contributor address; City; State; Zip Code 2013b Simond Ave Austin, TX 78723	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Travis County	
Date  07/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fajkowski, Pete  Contributor address; City; State; Zip Code 2500 Bettis Blvd Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable) food, beverages for fundraiser  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Chief Executive Officer		Employer (See Instructions) HomeStart	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/25 Report: 12/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  08/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gadell, Diane  6 Contributor address; City; State; Zip Code 13135 Mill Stone Dr Austin, TX 78729	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  07/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garvin, Dax  Contributor address; City; State; Zip Code 2800 Saint Frances Ct Round Rock, TX 78665	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed	
Date  08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gaynor, Dan (Mr.)  Contributor address; City; State; Zip Code 10901 Leafwood Ln Austin, TX 78750	Amount of contribution (\$)  \$147.83	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Design With Consignment	
Date  08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gaynor, Lisa (Mrs.)  Contributor address; City; State; Zip Code 10901 Leafwood Ln Austin, TX 78750	Amount of contribution (\$)  \$147.82	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Design With Consignment	
Date  07/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goddard, Zachary  Contributor address; City; State; Zip Code 18428 S Spruce St Gardner, KS 66030	Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) N/A	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/25 Report: 13/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Golden, Kyle  6 Contributor address; City; State; Zip Code 2316 Century Park Blvd Austin, TX 78727	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Trainer/Owner		10 Employer (See Instructions) Work It Personal Training LLC	
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goodfriend, Sarah  Contributor address; City; State; Zip Code 1500 W 24th St Austin, TX 78703	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Economist		Employer (See Instructions) Self-Employed	
Date  08/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, Gregory  Contributor address; City; State; Zip Code 12403 Mellow Meadow #304 Austin, TX 78750	Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) Bucy for Texas	
Date  08/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, Gregory  Contributor address; City; State; Zip Code 12403 Mellow Meadow #304 Austin, TX 78750	Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) Bucy for Texas	
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Spencer  Contributor address; City; State; Zip Code 2924 Kassarine Pass Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Self-Employed	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/25 Report: 14/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerrero, Emily  6 Contributor address; City; State; Zip Code 12310 Bainbridge Ln Austin, TX 78750	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Coordinator for Children's and Family Ministries		10 Employer (See Instructions) United Christian Church	
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guinn, Lucinda  Contributor address; City; State; Zip Code 1425 11th St NW #104 Washington, DC 20001	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) IE Director		Employer (See Instructions) Emily's List	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guthikonda, Gopal  Contributor address; City; State; Zip Code PO Box 200388 Austin, TX 78720	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CP&Y, Inc.	
Date  08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harp, James  Contributor address; City; State; Zip Code 6702 Langston Dr Austin, TX 78723	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Retired	
Date  07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinrich, Tammy  Contributor address; City; State; Zip Code 6303 Kury Lane Houston, TX 77008	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Terrace United Methodist Church	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 13/25 Report: 15/47	
2 FILER NAME Flannigan, James (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heinrich, Timothy Sr.  6 Contributor address; City; State; Zip Code 6303 Kury Lane Houston, TX 77008	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) BoyarMiller		
Date  09/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Edmundo  Contributor address; City; State; Zip Code 2616 Salado St 110 Austin, TX 78705	Amount of contribution (\$)  \$5.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) N/A		
Date  09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hlavinka, Bryan  Contributor address; City; State; Zip Code 1716 W Webster Houston, TX 77019	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) GATE, Inc		
Date  09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holmberg, Rick  Contributor address; City; State; Zip Code 2402 Gateshead Cir Austin, TX 78745	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Solarwinds		
Date  09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ishmael, Ed  Contributor address; City; State; Zip Code 2205 N Lamar Blvd #225 Austin, TX 78705	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/25 Report: 16/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Ezra  6 Contributor address; City; State; Zip Code 4911 La Posada San Antonio, TX 78233	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self-Employed	
Date  09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kendall, Sue Ann  Contributor address; City; State; Zip Code 9001 Braesgate Cv Austin, TX 78717	Amount of contribution (\$)  \$116.66	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Documentation Manager		Employer (See Instructions) Planview	
Date  09/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, David  Contributor address; City; State; Zip Code 1808 Kerr St Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  07/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kline, Richard  Contributor address; City; State; Zip Code 3001 Esperanza Crossing #1094 Austin, TX 78758	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Master Property Stager		Employer (See Instructions) Self-Employed	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kuhnen, Lori  Contributor address; City; State; Zip Code 9550 Savannah Ridge Dr Unit 47 Austin, TX 78726	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/25 Report: 17/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kyrejko, Andrew  6 Contributor address; City; State; Zip Code 420 W 42nd St Apt 10D New York, NY 10036	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Strategist		10 Employer (See Instructions) Self-Employed	
Date  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LaPlant, Suzanne  Contributor address; City; State; Zip Code 9420 Spring Hollow Dr Austin, TX 78750	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lill, Craig  Contributor address; City; State; Zip Code PO Box 300934 Austin, TX 78703	Amount of contribution (\$)  \$30.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) S&H Imports	
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lommori, James  Contributor address; City; State; Zip Code 5908 Carey Dr Austin, TX 78757	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Co-owner		Employer (See Instructions) Alori Properties	
Date  07/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mangin, Stephan  Contributor address; City; State; Zip Code 6605 Debcoc Dr Austin, TX 78749	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/25 Report: 18/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  07/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mantrom, Shannon  6 Contributor address; City; State; Zip Code 1503 Barn Swallow Dr Austin, TX 78746	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Area Solutions Coordinator		10 Employer (See Instructions) Praxis Fundraising Solution	
Date  08/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mason, Barbara  Contributor address; City; State; Zip Code 9550 Savannah Ridge Dr Unit 17 Austin, TX 78726	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired	
Date  09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxey, Glen  Contributor address; City; State; Zip Code 601 W 26th St B Austin, TX 78705	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Texas Democratic Party	
Date  07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCommon, Katherine  Contributor address; City; State; Zip Code 2407 S Congress Ave #E-116 Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Intelligent Lighting Design	
Date  07/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKenzie, JoAnn  Contributor address; City; State; Zip Code 6902 Edgefield Dr Austin, TX 78731	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Financial Planning		Employer (See Instructions) JoAnn McKenzie LLC	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/25 Report: 19/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  08/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKnight, Barbara  6 Contributor address; City; State; Zip Code 12510 Shasta Lane Austin, TX 78729	7 Amount of contribution (\$)  \$20.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date  09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKnight, Barbara  Contributor address; City; State; Zip Code 12510 Shasta Lane Austin, TX 78729	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meyer, Scott  Contributor address; City; State; Zip Code 2401 Kathy Cv Austin, TX 78704	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emergency Services Partners	
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meyer, Scott  Contributor address; City; State; Zip Code 2401 Kathy Cv Austin, TX 78704	Amount of contribution (\$)  \$125.00	In-kind contribution description (if applicable) food/bev for brunch fundraiser on 9/14  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Emergency Services Partners	
Date  08/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Chance  Contributor address; City; State; Zip Code 729 15th St NW 9th Floor Washington, DC 20005	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) NGLCC	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 18/25 Report: 20/47	
2 FILER NAME Flannigan, James (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Derrick		7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable) campaign video production	
6 Contributor address; City; State; Zip Code 3009 Cherrywood Rd Unit A Austin, TX 78722			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Sole Proprietor			10 Employer (See Instructions) DeMi Photo + Video		
Date  07/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Musselman, Karl-Thomas		Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2819 Foster Lane #F244 Austin, TX 78757			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Writer, Rabble Rouser			Employer (See Instructions) Self-Employed		
Date  07/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Najar, Michelle		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 6207 Avery Island Ave Austin, TX 78727			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Contractor			Employer (See Instructions) Self-Employed		
Date  09/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Najar, Michelle		Amount of contribution (\$)  \$38.47	In-kind contribution description (if applicable) food and beverages for house party	
Contributor address; City; State; Zip Code 6207 Avery Island Ave Austin, TX 78727			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Contractor			Employer (See Instructions) Self-Employed		
Date  09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Najar, Michelle		Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 6207 Avery Island Ave Austin, TX 78727			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Contractor			Employer (See Instructions) Self-Employed		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/25 Report: 21/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nasr, David  6 Contributor address; City; State; Zip Code 8701 W Parmer Ln Apt 2115 Austin, TX 78729	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Sales		10 Employer (See Instructions) Apple	
Date  09/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Negron, Leslie  Contributor address; City; State; Zip Code 1305 Dillon Lake Bend Austin, TX 78641	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed	
Date  07/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Noonal, Coral  Contributor address; City; State; Zip Code 1566 CR 316 Lexington, TX 78947	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) National American University	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O Raghallaigh, Cavan  Contributor address; City; State; Zip Code 1509 Hollow Tree Round Rock, TX 78681	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Human		Employer (See Instructions) Retired	
Date  09/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parson, Richard  Contributor address; City; State; Zip Code 2301 Windrift Way Round Rock, TX 78664	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) U.S. Postal Service		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/25 Report: 22/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pizzatola, John  6 Contributor address; City; State; Zip Code PO Box 302710 Austin, TX 78703	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Realtor		10 Employer (See Instructions) Perfect Tree Realty	
Date  09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Plummer, Douglas  Contributor address; City; State; Zip Code 301 E 35th St Austin, TX 78705	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable) food/bev for brunch fundraiser on 9/14  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Midtown Title	
Date  09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Poore, Megan  Contributor address; City; State; Zip Code 8420 Cahill Dr Austin, TX 78729	Amount of contribution (\$)  \$75.00	In-kind contribution description (if applicable) food/bev for house party  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Financial Adviser		Employer (See Instructions) Lucien, Stirling and Gray, Advisory Group, Inc.	
Date  08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prendergast, Daria  Contributor address; City; State; Zip Code 11203 Thorny Brook Trail Austin, TX 78750	Amount of contribution (\$)  \$12.00	In-kind contribution description (if applicable) food/bev for house party; bottled water  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rebman, James  Contributor address; City; State; Zip Code 188 Cinder Cv Dripping Springs, TX 78620	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Sr VP		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 21/25 Report: 23/47	
2 FILER NAME Flannigan, James (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  08/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Susan  6 Contributor address; City; State; Zip Code 12200 Waterside Trail Austin, TX 78750		7 Amount of contribution (\$)  \$5.00	8 In-kind contribution description (if applicable) bottled water
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Volunteer			10 Employer (See Instructions) Retired	
Date  09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Riddles, Heath  Contributor address; City; State; Zip Code 900 S Lamar Blvd #208 Austin, TX 78704		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Marketing			Employer (See Instructions) The Long Center	
Date  09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Curt  Contributor address; City; State; Zip Code 9726 Copper Creek Dr Austin, TX 78729		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Director			Employer (See Instructions) VacationRoost	
Date  09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose, Amanda  Contributor address; City; State; Zip Code 6203 Linda Lane Austin, TX 78723		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) employee			Employer (See Instructions) rES	
Date  09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schawel, David  Contributor address; City; State; Zip Code 505 E Annie St Austin, TX 78704		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Photographer			Employer (See Instructions) Tour Factory	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 22/25 Report: 24/47	
2 FILER NAME Flannigan, James (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  08/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schultz, Eric		7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 10807 Keystone Bend Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Landscape Architect			10 Employer (See Instructions) dwg.	
Date  09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steiner, Tina		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 608 Spring St Round Rock, TX 78664		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Teacher			Employer (See Instructions) Round Rock ISD	
Date  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stokes, Gay		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12005 Grey Rock Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) N/A			Employer (See Instructions) Retired	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stonewall Democrats of Austin PAC		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 40898 Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Teffer, Lena		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10710 Spicewood Club Dr Austin, TX 78750		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Homemaker			Employer (See Instructions) N/A	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 23/25 Report: 25/47	
2 FILER NAME Flannigan, James (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  07/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thai, Ravel		7 Amount of contribution (\$)  \$200.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2930 E 12th St Unit A Austin, TX 78702		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) Product Marketing Manager			10 Employer (See Instructions) VisionWeb		
Date  09/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas, Kathleen		Amount of contribution (\$)  \$33.00		In-kind contribution description (if applicable) food/bev for ice cream social
Contributor address; City; State; Zip Code 13524 Evergreen Way Austin, TX 78737		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Event Designer/Planner			Employer (See Instructions) TSORF, Inc.		
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Towe, Candice		Amount of contribution (\$)  \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2709 Rolling Oaks San Marcos, TX 78666		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Chief Operations Officer			Employer (See Instructions) Girl Scouts of Central Texas		
Date  08/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tuerff, Kevin		Amount of contribution (\$)  \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 101 Colorado St Apt 2304 Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) President			Employer (See Instructions) EnviroMedia		
Date  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wall, Jason		Amount of contribution (\$)  \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2601 Bolton St Austin, TX 78748		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Research Scientist			Employer (See Instructions) Thermo Fisher Scientific		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/25 Report: 26/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weathers, Daniel  6 Contributor address; City; State; Zip Code 13913 Lampting Dr Pflugerville, TX 78660	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Operations		10 Employer (See Instructions) Apptive	
Date  09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Witbrock, Michael  Contributor address; City; State; Zip Code 3911 Walnut Clay Dr Austin, TX 78731	Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Scientists		Employer (See Instructions) Cycorp, Inc.	
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wong, Chi  Contributor address; City; State; Zip Code 330 Parnassus Ave Apt 103 San Francisco, CA 94117	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Fugro	
Date  09/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wynne, Anne  Contributor address; City; State; Zip Code 2901 Via Fortuna Suite 450 Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ikard Wynne LLP	
Date  09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Young, Timothy  Contributor address; City; State; Zip Code 3809 Hidden Hollow Austin, TX 78731	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ikard Wynne LLP	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/25 Report: 27/47	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date  09/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zigrossi, Pat  6 Contributor address; City; State; Zip Code 11300 Pickfair Dr Austin, TX 78750	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions) None	

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/18 Report: 28/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/24/2014	<b>5 Payee name</b> Academy Sports + Outdoors				
<b>6 Amount (\$)</b> \$10.80	<b>7 Payee address</b> City: State; Zip Code 12250 Research Blvd Austin, TX 78759				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> stakes for Anderson Mill road sign		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/28/2014	<b>Payee name</b> Amazon.com				
<b>Amount (\$)</b> \$119.80	<b>Payee address</b> City: State; Zip Code PO Box 81226 Seattle, WA 98108				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> water bottle holders with straps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/18/2014	<b>Payee name</b> American Printing and Mailing				
<b>Amount (\$)</b> \$1,111.73	<b>Payee address</b> City: State; Zip Code 1606 Headway Circle Austin, TX 78754				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> sheets of printed corrugated plastic hammers to add to road signs and yard signs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/19/2014	<b>Payee name</b> American Printing and Mailing				
<b>Amount (\$)</b> \$1,441.93	<b>Payee address</b> City: State; Zip Code 1606 Headway Circle Austin, TX 78754				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> push cards		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/18 Report: 29/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 09/15/2014	<b>5 Payee name</b> Balcones Country Club Women's Association Scholarship Fund				
<b>6 Amount (\$)</b> \$150.00	<b>7 Payee address</b> City; State; Zip Code 11202 Pickfari Dr Austin, TX 78750				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Market Days advertisement -- 1/2 page in program		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/05/2014	<b>Payee name</b> Bat City, Inc.				
<b>Amount (\$)</b> \$463.31	<b>Payee address</b> City; State; Zip Code 1707 Nueces St Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign t shirts		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/21/2014	<b>Payee name</b> CheckMark Typesetting				
<b>Amount (\$)</b> \$1,664.68	<b>Payee address</b> City; State; Zip Code 3217 N IH 35 Austin, TX 78722				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 26 x 16 inch yard signs with metal frames		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/22/2014	<b>Payee name</b> CheckMark Typesetting				
<b>Amount (\$)</b> \$1,303.47	<b>Payee address</b> City; State; Zip Code 3217 N IH 35 Austin, TX 78722				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 4 x 8 foot road signs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/18 Report: 30/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
---	--	---	--	---	--

<b>4 Date</b> 09/05/2014	<b>5 Payee name</b> Cherico, Jonn				
<b>6 Amount (\$)</b> \$250.00	<b>7 Payee address</b> City; State; Zip Code 1813 Richcreek Austin, TX 78757				
<b>8 PURPOSE OF EXPENDITURE</b>	<table style="width:100%;"> <tr> <td style="width:50%;"> <b>(a) Category</b> (See Categories listed at the top of this schedule)            Advertising Expense         </td> <td style="width:50%;"> <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>            money for purchases related to campaign video supplies         </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b> </td> </tr> </table>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> money for purchases related to campaign video supplies	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>	
<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> money for purchases related to campaign video supplies				
<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>					
<b>9 Complete ONLY</b> if direct expenditure to benefit C/OH	<table style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought:</td> <td style="width:25%;">Office held:</td> </tr> </table>	Candidate / Officeholder name	Office sought:	Office held:	
Candidate / Officeholder name	Office sought:	Office held:			

<b>Date</b> 07/26/2014	<b>Payee name</b> Chevron				
<b>Amount (\$)</b> \$27.54	<b>Payee address</b> City; State; Zip Code 2710 Bee Caves Rd Austin, TX 78746				
<b>PURPOSE OF EXPENDITURE</b>	<table style="width:100%;"> <tr> <td style="width:50%;"> <b>Category</b> (See Categories listed at the top of this schedule)            Event Expense         </td> <td style="width:50%;"> <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>            Ice         </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b> </td> </tr> </table>	<b>Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ice	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>	
<b>Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ice				
<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>					
<b>Complete ONLY</b> if direct expenditure to benefit C/OH	<table style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought:</td> <td style="width:25%;">Office held:</td> </tr> </table>	Candidate / Officeholder name	Office sought:	Office held:	
Candidate / Officeholder name	Office sought:	Office held:			

<b>Date</b> 08/16/2014	<b>Payee name</b> Christensen, Elizabeth				
<b>Amount (\$)</b> \$240.00	<b>Payee address</b> City; State; Zip Code PO Box 1792 Austin, TX 78767				
<b>PURPOSE OF EXPENDITURE</b>	<table style="width:100%;"> <tr> <td style="width:50%;"> <b>Category</b> (See Categories listed at the top of this schedule)            Salaries/Wages/Contract Labor         </td> <td style="width:50%;"> <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>            Aug 8 - Aug 16: canvassing and data entry         </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b> </td> </tr> </table>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Aug 8 - Aug 16: canvassing and data entry	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>	
<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Aug 8 - Aug 16: canvassing and data entry				
<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>					
<b>Complete ONLY</b> if direct expenditure to benefit C/OH	<table style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought:</td> <td style="width:25%;">Office held:</td> </tr> </table>	Candidate / Officeholder name	Office sought:	Office held:	
Candidate / Officeholder name	Office sought:	Office held:			

<b>Date</b> 08/30/2014	<b>Payee name</b> Christensen, Elizabeth				
<b>Amount (\$)</b> \$295.00	<b>Payee address</b> City; State; Zip Code PO Box 1792 Austin, TX 78767				
<b>PURPOSE OF EXPENDITURE</b>	<table style="width:100%;"> <tr> <td style="width:50%;"> <b>Category</b> (See Categories listed at the top of this schedule)            Salaries/Wages/Contract Labor         </td> <td style="width:50%;"> <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>            Aug 17 - 31: canvassing and data entry         </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b> </td> </tr> </table>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Aug 17 - 31: canvassing and data entry	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>	
<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Aug 17 - 31: canvassing and data entry				
<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>					
<b>Complete ONLY</b> if direct expenditure to benefit C/OH	<table style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought:</td> <td style="width:25%;">Office held:</td> </tr> </table>	Candidate / Officeholder name	Office sought:	Office held:	
Candidate / Officeholder name	Office sought:	Office held:			

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/18 Report: 31/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00629478	
<b>4 Date</b> 09/13/2014	<b>5 Payee name</b> Christensen, Elizabeth				
<b>6 Amount (\$)</b> \$300.00	<b>7 Payee address</b> City: State: Zip Code PO Box 1792 Austin, TX 78767				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sept 1 - Sept 15: canvassing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/14/2014	<b>Payee name</b> Cox Media Group				
<b>Amount (\$)</b> \$9.99	<b>Payee address</b> City: State: Zip Code 6205 Peachtree Dunwoody Rd Atlanta, GA 30328				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> subscription to Austin American Statesman		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/12/2014	<b>Payee name</b> Cox Media Group				
<b>Amount (\$)</b> \$9.99	<b>Payee address</b> City: State: Zip Code 6205 Peachtree Dunwoody Rd Atlanta, GA 30328				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> subscription to Austin American-Statesman		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/10/2014	<b>Payee name</b> Cox Media Group				
<b>Amount (\$)</b> \$9.99	<b>Payee address</b> City: State: Zip Code 6205 Peachtree Dunwoody Rd Atlanta, GA 30328				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> subscription to Austin American-Statesman		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 5/18 Report: 32/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00629478	
<b>4 Date</b> 07/21/2014	<b>5 Payee name</b> Creation Station Printing and Design				
<b>6 Amount (\$)</b> \$361.56	<b>7 Payee address</b> City: State: Zip Code 2410 East Riverside Dr Suite C4 Austin, TX 78741				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 4 x 9 push cards		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/22/2014	<b>Payee name</b> Creation Station Printing and Design				
<b>Amount (\$)</b> \$192.47	<b>Payee address</b> City: State: Zip Code 2410 East Riverside Dr Suite C4 Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 2 x 4 inch stickers		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/18/2014	<b>Payee name</b> Cuppa Austin				
<b>Amount (\$)</b> \$11.00	<b>Payee address</b> City: State: Zip Code 9225 W Parmer Lane Austin, TX 78717				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee/water/food for volunteers		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/25/2014	<b>Payee name</b> DeMi Photo + Video				
<b>Amount (\$)</b> \$2,000.00	<b>Payee address</b> City: State: Zip Code 3009 Cherrywood Rd Unit A Austin, TX 78722				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign video production		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 6/18 Report: 33/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 07/21/2014	<b>5 Payee name</b> Facebook				
<b>6 Amount (\$)</b> \$25.08	<b>7 Payee address</b> City: State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/24/2014	<b>Payee name</b> Facebook				
<b>Amount (\$)</b> \$50.16	<b>Payee address</b> City: State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/31/2014	<b>Payee name</b> Facebook				
<b>Amount (\$)</b> \$70.29	<b>Payee address</b> City: State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/20/2014	<b>Payee name</b> Facebook				
<b>Amount (\$)</b> \$250.35	<b>Payee address</b> City: State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 7/18 Report: 34/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/31/2014	<b>5 Payee name</b> Facebook				
<b>6 Amount (\$)</b> \$181.25	<b>7 Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/25/2014	<b>Payee name</b> Facebook				
<b>Amount (\$)</b> \$500.06	<b>Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook advertising		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/31/2014	<b>Payee name</b> FedEx				
<b>Amount (\$)</b> \$6.02	<b>Payee address</b> City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> call sheets		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/02/2014	<b>Payee name</b> FedEx				
<b>Amount (\$)</b> \$12.26	<b>Payee address</b> City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> walk sheets		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 8/18 Report: 35/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/03/2014	<b>5 Payee name</b> FedEx				
<b>6 Amount (\$)</b> \$22.86	<b>7 Payee address</b> City: State; Zip Code 2711 Guadalupe St Austin, TX 78705				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> walk sheets		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/07/2014	<b>Payee name</b> FedEx				
<b>Amount (\$)</b> \$6.08	<b>Payee address</b> City: State; Zip Code 2711 Guadalupe St Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> walk sheets		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/08/2014	<b>Payee name</b> FedEx				
<b>Amount (\$)</b> \$2.98	<b>Payee address</b> City: State; Zip Code 2711 Guadalupe St Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing for report		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/22/2014	<b>Payee name</b> FedEx				
<b>Amount (\$)</b> \$2.43	<b>Payee address</b> City: State; Zip Code 13809 N Hwy 183 Austin, TX 78750				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> scanner usage fee		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 9/18 Report: 36/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00629478	
<b>4 Date</b> 07/14/2014	<b>5 Payee name</b> Fun Loving Photos				
<b>6 Amount (\$)</b> \$150.00	<b>7 Payee address</b> City: State: Zip Code 1611 B Collier St Austin, TX 78704				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photo shoot for political advertisements		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/15/2014	<b>Payee name</b> Heinrich, Allison				
<b>Amount (\$)</b> \$1,250.00	<b>Payee address</b> City: State: Zip Code 2606 Rio Grande St #101 Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> June Salary for campaign work		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/31/2014	<b>Payee name</b> Heinrich, Allison				
<b>Amount (\$)</b> \$1,250.00	<b>Payee address</b> City: State: Zip Code 9807 N FM 620 #21102 Austin, TX 78726				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> July Salary for campaign work		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/25/2014	<b>Payee name</b> Heinrich, Allison				
<b>Amount (\$)</b> \$2,500.00	<b>Payee address</b> City: State: Zip Code 9807 N FM 620 #21102 Austin, TX 78726				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> August Salary for campaign work		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 10/18 Report: 37/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/22/2014	<b>5 Payee name</b> Home Depot				
<b>6 Amount (\$)</b> \$51.54	<b>7 Payee address</b> City; State; Zip Code 10515 N Mopac Expy Austin, TX 78759				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> t-posts and cable ties for road signs		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/24/2014	<b>Payee name</b> Home Depot				
<b>Amount (\$)</b> \$2.12	<b>Payee address</b> City; State; Zip Code 10515 N Mopac Expy Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> galvanized wire for Anderson Mill road sign		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/26/2014	<b>Payee name</b> Home Depot				
<b>Amount (\$)</b> \$3.49	<b>Payee address</b> City; State; Zip Code 11301 Lakeline Blvd Austin, TX 78717				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> staples for staple gun		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/10/2014	<b>Payee name</b> Kerbey Lane Cafe				
<b>Amount (\$)</b> \$24.00	<b>Payee address</b> City; State; Zip Code 13435 Hwy 183 Ste 415 Austin, TX 78704				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> lunch meeting -- 9/10		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 11/18 Report: 38/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/30/2014	<b>5 Payee name</b> M & G Sign Placement Services				
<b>6 Amount (\$)</b> \$1,035.00	<b>7 Payee address</b> City: State: Zip Code 6410 Ponca Street Austin, TX 78741				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> payment for road sign placement/installation		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/13/2014	<b>Payee name</b> Mi Pizza				
<b>Amount (\$)</b> \$53.00	<b>Payee address</b> City: State: Zip Code 6001 W Parmer Lane Suite 440 Austin, TX 78727				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> pizza for house party		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/21/2014	<b>Payee name</b> NationBuilder				
<b>Amount (\$)</b> \$78.00	<b>Payee address</b> City: State: Zip Code 448 S Hill St #200 Los Angeles, CA 90013				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Website - July		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/21/2014	<b>Payee name</b> NationBuilder				
<b>Amount (\$)</b> \$78.00	<b>Payee address</b> City: State: Zip Code 448 S Hill St #200 Los Angeles, CA 90013				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Website -- August		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 12/18 Report: 39/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 09/21/2014	<b>5 Payee name</b> NationBuilder				
<b>6 Amount (\$)</b> \$78.00	<b>7 Payee address</b> City; State; Zip Code 448 S Hill St #200 Los Angeles, CA 90013				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Website -- September		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/06/2014	<b>Payee name</b> Office Depot				
<b>Amount (\$)</b> \$49.75	<b>Payee address</b> City; State; Zip Code 4501 West Braker Lane Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies -- ink, paper		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/16/2014	<b>Payee name</b> Office Max				
<b>Amount (\$)</b> \$31.67	<b>Payee address</b> City; State; Zip Code 4615 N Lamar Austin, TX 78751				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies -- paper, ink, binder clips		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/15/2014	<b>Payee name</b> OfficeMax				
<b>Amount (\$)</b> \$71.40	<b>Payee address</b> City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies -- ink and file storage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 13/18 Report: 40/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/13/2014	<b>5 Payee name</b> OfficeMax				
<b>6 Amount (\$)</b> \$178.95	<b>7 Payee address</b> City: State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies -- paper, envelopes, ink, labels, etc		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/28/2014	<b>Payee name</b> Rock N Roll Rentals				
<b>Amount (\$)</b> \$12.99	<b>Payee address</b> City: State; Zip Code 1420 W. Oltorf St Austin, TX 78704				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PA system rental 7/25-7/28		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/02/2014	<b>Payee name</b> Shell Gas Station				
<b>Amount (\$)</b> \$4.95	<b>Payee address</b> City: State; Zip Code 13296 N Hwy 183 Austin, TX 78750				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> bottled water		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/23/2014	<b>Payee name</b> Starbucks				
<b>Amount (\$)</b> \$17.27	<b>Payee address</b> City: State; Zip Code 13450 Research Blvd Austin, TX 78750				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee/water/food for volunteers		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 14/18 Report: 41/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/24/2014	<b>5 Payee name</b> Starbucks				
<b>6 Amount (\$)</b> \$5.85	<b>7 Payee address</b> City; State; Zip Code 13450 Research Blvd Austin, TX 78750				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee/water/food for volunteers		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/30/2014	<b>Payee name</b> Starbucks				
<b>Amount (\$)</b> \$8.55	<b>Payee address</b> City; State; Zip Code 10900 Research Blvd Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee/water/food for volunteers		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/30/2014	<b>Payee name</b> Starbucks				
<b>Amount (\$)</b> \$4.60	<b>Payee address</b> City; State; Zip Code 10900 Research Blvd Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee/water/food for volunteers		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/13/2014	<b>Payee name</b> Starbucks				
<b>Amount (\$)</b> \$24.90	<b>Payee address</b> City; State; Zip Code 6301 West Parmer Lane Austin, TX 78729				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee/water/food for volunteers		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 15/18 Report: 42/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00629478	
<b>4 Date</b> 07/02/2014	<b>5 Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>6 Amount (\$)</b> \$21.40	<b>7 Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with online payment gateway		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/08/2014	<b>Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>Amount (\$)</b> \$5.40	<b>Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with credit card swiper payment gateway		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/08/2014	<b>Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>Amount (\$)</b> \$303.97	<b>Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> statement fees for credit card processing		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/04/2014	<b>Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>Amount (\$)</b> \$20.65	<b>Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with online payment gateway		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
FeesGifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing ExpenseSalaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)**The INSTRUCTION GUIDE explains how to complete this form.**

<b>1 PAGE #</b> Schedule: 16/18 Report: 43/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 08/06/2014	<b>5 Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>6 Amount (\$)</b> \$130.76	<b>7 Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> statement fees for credit card processing		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/21/2014	<b>Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>Amount (\$)</b> \$108.70	<b>Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> statement fees for credit card processing		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/03/2014	<b>Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>Amount (\$)</b> \$20.95	<b>Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with online payment gateway		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/08/2014	<b>Payee name</b> Strategic Payment Sysyetms, Inc.				
<b>Amount (\$)</b> \$181.20	<b>Payee address</b> City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> statement fees for credit card processing		
	<input type="checkbox"/> <b>Check if Austin, TX, officeholder living expense</b>				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 17/18 Report: 44/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00629478	
<b>4 Date</b> 09/09/2014	<b>5 Payee name</b> Strategic Payment Sysyetrms, Inc.				
<b>6 Amount (\$)</b> \$5.00	<b>7 Payee address</b> City: State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with credit card swiper payment gateway <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/20/2014	<b>Payee name</b> Target				
<b>Amount (\$)</b> \$16.10	<b>Payee address</b> City: State; Zip Code 5621 N IH-35 Austin, TX 78723				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies -- pens. envelopes, etc <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/28/2014	<b>Payee name</b> The Jewish Outlook				
<b>Amount (\$)</b> \$254.00	<b>Payee address</b> City: State; Zip Code 4007 Madrid Cove Austin, TX 78759				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> advertisement for October edition <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/07/2014	<b>Payee name</b> US Post Office -- Central Park West Station				
<b>Amount (\$)</b> \$70.07	<b>Payee address</b> City: State; Zip Code 3507 N Lamar Blvd Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 18/18 Report: 45/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT #</b> (TEC filers) 00629478	
<b>4 Date</b> 07/25/2014	<b>5 Payee name</b> US Post Office -- Central Park West Station				
<b>6 Amount (\$)</b> \$6.37	<b>7 Payee address</b> City: State; Zip Code 3507 N Lamar Blvd Austin, TX 78705				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/21/2014	<b>Payee name</b> US Post Office -- Central Park West Station				
<b>Amount (\$)</b> \$9.80	<b>Payee address</b> City: State; Zip Code 3507 N Lamar Blvd Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/31/2014	<b>Payee name</b> Waterloo Printing				
<b>Amount (\$)</b> \$514.18	<b>Payee address</b> City: State; Zip Code 1507 Valley Ridge Dr Austin, TX 78704				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign t-shirts		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/2 Report: 46/47		<b>2 FILER NAME</b> Flannigan, James (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00629478	
<b>4 Date</b> 09/17/2014		<b>5 Payee name</b> Cherico, Jonn			
<b>6 Amount (\$)</b> \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>7 Payee address</b> City; State; Zip Code 1813 Richcreek Austin, TX 78757			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> money for purchases related to campaign video supplies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Date</b> 08/04/2014		<b>Payee name</b> Facebook			
<b>Amount (\$)</b> \$6.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> promoted post on personal page  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Date</b> 08/11/2014		<b>Payee name</b> Facebook			
<b>Amount (\$)</b> \$6.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> promoted post on personal facebook page  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Date</b> 09/09/2014		<b>Payee name</b> Facebook			
<b>Amount (\$)</b> \$6.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> promoted post on personal facebook page  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS****SCHEDULE G****EXPENDITURE CATEGORIES**Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
FeesGifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing ExpenseSalaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)**The INSTRUCTION GUIDE explains how to complete this form.****1 PAGE #**

Schedule: 2/2 Report: 47/47

**2 FILER NAME**

Flannigan, James (Mr.)

**3 ACCOUNT # (TEC filers)**

00629478

**4 Date**

09/17/2014

**5 Payee name**

Kenfield Golf Cars

**6 Amount (\$)**

\$248.98

**7 Payee address**

City: State: Zip Code

13357 Pond Springs Rd  
Austin, TX 78729☐ Reimbursement  
from political  
contributions intended**8****PURPOSE  
OF  
EXPENDITURE****(a) Category (See Categories listed at the top of this schedule)**

Event Expense

**(b) Description (If travel outside of Texas, complete Schedule T)** ☐

golf cart rentals for video shoot

☐ Check if Austin, TX, officeholder living expense