

FORM C/OH
COVER SHEET PG 1

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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Flannigan, James (Mr.)**14 ACCOUNT #** (Ethics Commission filers)
00629478**15 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

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

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****16 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

7,165.00

**EXPENDITURE
TOTALS**

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

32,174.20

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

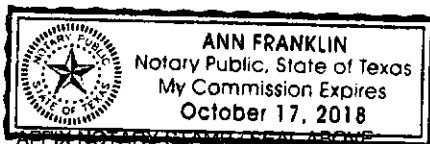
**OUTSTANDING
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

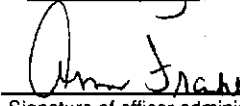
\$

0.00

17 AFFIDAVIT

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



 Signature of Candidate or Officeholder
Sworn to and subscribed before me, by the said James Flannigan, this the 15th day of January, 2015, to certify which, witness my hand and seal of office.

 Signature of officer administering oath

Ann Franklin
 Print name of officer administering oath

Notary
 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: 1/12 Report: 3/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abell, William 6 Contributor address; City; State; Zip Code 1607 Kerr Ave Austin, TX 78704	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) Retail Store Owner		10 Employer (See Instructions) Bicycle Sports Shop	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adams, Jim Contributor address; City; State; Zip Code 4000 Pinckney St 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) Architect		Employer (See Instructions) McCann Adams Studio	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arnett, Mary Contributor address; City; State; Zip Code 3209 A Mossrock Dr Austin, TX 78757	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) Direct Insurance Agent		Employer (See Instructions) Progressive Insurance	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bercu, Steven Contributor address; City; State; Zip Code 4108 Burnet Rd Austin, TX 78756	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) Bookseller		Employer (See Instructions) BookPeople	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brand, Patricia Contributor address; City; State; Zip Code 10013 Morgan Creek Dr Austin, TX 78717	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) Accountant		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: 2/12 Report: 4/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Thomas A. 6 Contributor address; City; State; Zip Code 505 E Annie St Austin, TX 78704	7 Amount of contribution (\$) \$200.00	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) Vice President		10 Employer (See Instructions) Spredfast	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Thomas A. Contributor address; City; State; Zip Code 505 E Annie St Austin, TX 78704	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) facebook advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Spredfast	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buhro, Jason Contributor address; City; State; Zip Code 11416 Pyreneese Dr Austin, TX 78759	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 of Software Engineering		Employer (See Instructions) Continuum Applied Technology	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bunch, William Contributor address; City; State; Zip Code 1307 Oxford Ave 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) Attorney		Employer (See Instructions) SOS Alliance	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Castro, Nicole Contributor address; City; State; Zip Code PO Box 1085 Round Rock, TX 78680	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: 3/12 Report: 5/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/09/2014	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) Marketing		10 Employer (See Instructions) Retired	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeWitt, Thom Contributor address; City; State; Zip Code 3701 Turtle Creek Blvd Suite 6A Dallas, TX 75219	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 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeWitt, Tim Contributor address; City; State; Zip Code 3701 Turtle Creek Blvd Suite 6A Dallas, TX 75219	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 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Douglass, Gregory Contributor address; City; State; Zip Code 1211 Creekview Dr 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) Attorney		Employer (See Instructions) Self-Employed	
Date 12/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Douglass, Gregory Contributor address; City; State; Zip Code 1211 Creekview Dr Round Rock, TX 78681	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) 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: 4/12 Report: 6/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, David 6 Contributor address; City; State; Zip Code 2715 Woolridge Dr Austin, TX 78703	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) Professor		10 Employer (See Instructions) The University of Texas	
Date 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, Sasha Contributor address; City; State; Zip Code 2715 Woolridge Dr Austin, TX 78703	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 12/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Evolve Austin PAC Contributor address; City; State; Zip Code 411 Brazos St Ste 99 Austin, TX 78701	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 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fraser, Susan Contributor address; City; State; Zip Code 4603 Depew Ave Austin, TX 78751	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) Lockwood, Andrews & Newman	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardin, Drew Contributor address; City; State; Zip Code 16900 Crystal Caves Rd Austin, TX 78737	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) Civil Engineer		Employer (See Instructions) Lockwood, Andrews & Newman, Inc.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/12 Report: 7/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) HBA Home PAC 6 Contributor address; City; State; Zip Code 8140 Exchange Dr Austin, TX 78754	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)		10 Employer (See Instructions)	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herring, Charles Jr. Contributor address; City; State; Zip Code 1204 Castle Hill 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) Attorney		Employer (See Instructions) Herring & Irwin	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herring, William Contributor address; City; State; Zip Code 1000 E 38th St Austin, TX 78705	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 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hollingsworth, Desiree Contributor address; City; State; Zip Code 100 Congress Ave Ste 1300 Austin, TX 78701	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) Retailer		Employer (See Instructions) Self-Employed	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hollingsworth, Wayne Contributor address; City; State; Zip Code 100 Congress Ave Ste 1300 Austin, TX 78701	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) Armbrust & Brown	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/12 Report: 8/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howard, Robert 6 Contributor address; City; State; Zip Code 2315 Westforest Dr Austin, TX 78704	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) Consultant		10 Employer (See Instructions) Self-Employed	
Date 12/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Husch Blackwell LLP Contributor address; City; State; Zip Code 4801 Main St Suite 100 Kansas City, MO 64112	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 12/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Husch Blackwell State PAC Contributor address; City; State; Zip Code 111 Congress Ave Suite 1400 Austin, TX 78701	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 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jang, William Contributor address; City; State; Zip Code 314 E Highland Mall Blvd #406 Austin, TX 78752	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) Attorney		Employer (See Instructions) Law Office of William Jang, PLLC	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Levinson, Kimberly Contributor address; City; State; Zip Code 98 San Jacinto Blvd FSR #1007 Austin, TX 78701	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) Political Consultant		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: 7/12 Report: 9/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lynch, Michelle Rogerson 6 Contributor address; City; State; Zip Code 2634 Cascade Falls Dr Austin, TX 78738	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) Director of Land Use and Entitlements		10 Employer (See Instructions) Metcalf Wolf Stuart & Williams, LLP	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Victor Contributor address; City; State; Zip Code 6620 Bay City Bend Austin, TX 78725	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) SMTS		Employer (See Instructions) Freescale Semiconductor	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Massicotte, Chris Contributor address; City; State; Zip Code 1239 Vermont Ave NW Apt 402 Washington, DC 20005	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) COO		Employer (See Instructions) DSPolitical	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McClellan, Matthew Contributor address; City; State; Zip Code 1225 Wylie St NE Washington, DC 20002	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) Chief of Staff		Employer (See Instructions) Democracia USA	
Date 12/09/2014	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	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/12 Report: 10/32	
2 FILER NAME <i>Flannigan, James (Mr.)</i>		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Meade, Nikelle</i> 6 Contributor address; City; State; Zip Code <i>5363 Austral Loop Austin, TX 78739</i>	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) Attorney		10 Employer (See Instructions) Brown McCarroll LLP	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Metcalf, Steven</i> Contributor address; City; State; Zip Code <i>388 Cortona Dr Austin, TX 78746</i>	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 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Morter, Christopher</i> Contributor address; City; State; Zip Code <i>110 Wyndham Dr NW Atlanta, GA 30328</i>	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) Corporate Counsel		Employer (See Instructions) Cox Communications, Inc	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Mueller, Elizabeth</i> Contributor address; City; State; Zip Code <i>3213 French Place Austin, TX 78722</i>	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) Professor		Employer (See Instructions) The University of Texas	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Niland, Nona</i> Contributor address; City; State; Zip Code <i>3939 Bee Cave Rd C-100 Austin, TX 78701</i>	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 MD		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: 9/12 Report: 11/32	
2 FILER NAME <i>Flannigan, James (Mr.)</i>		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nuckols, Tom 6 Contributor address; City; State; Zip Code 2910 Kassarine Pass Austin, TX 78704	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) Lawyer		10 Employer (See Instructions) Travis County	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pellett, Clark Contributor address; City; State; Zip Code 680 N Lakeshore Chicago, IL 66011	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) Attorney/Consultant		Employer (See Instructions) Self-Employed	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prager, Herman PhD Contributor address; City; State; Zip Code 8600 N FM 620 #210 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) Adjunct Professor of Government		Employer (See Instructions) Austin Community College	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richie, Carl Contributor address; City; State; Zip Code 11208 Sacahuista Ct Austin, TX 78750	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) Self-Employed	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosen, Seth Contributor address; City; State; Zip Code 235 W 102nd St Apt 17N New York, NY 10025	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) Consultant		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: 10/12 Report: 12/32	
2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00629478	
4 Date 12/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rothe, Gail 6 Contributor address; City; State; Zip Code 1705 Margaret St Austin, TX 78704	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) Planner		10 Employer (See Instructions) Self-Employed	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rudner, Steven Contributor address; City; State; Zip Code 6346 Woodland Dr Dallas, TX 75225	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) Rudner Law Offices	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sanger, Mary Contributor address; City; State; Zip Code 704 Carolyn Ave 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) Outreach and Research Specialist		Employer (See Instructions) Environmental Defense Fund	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shanks, John Contributor address; City; State; Zip Code 7207 S Ute Trl Austin, TX 78729	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) Chef		Employer (See Instructions) Retired	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Small, Clint Contributor address; City; State; Zip Code 5402 Ridge Oak Dr 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) Owner		Employer (See Instructions) Clint Small Custom Homes	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/12 Report: 13/32

2 FILER NAME Flannigan, James (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00629478

4 Date

12/08/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Smith, Mona

6 Contributor address; City; State; Zip Code
4508 41st Ave
Seattle, WA 98118

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Self-Employed

Date

12/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stotz, James

Contributor address; City; State; Zip Code
406 Chaparral Rd
Austin, TX 78745

Amount of
contribution (\$)

\$10.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
IT

Employer (See Instructions)
Self-Employed

Date

12/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stuart, Donald

Contributor address; City; State; Zip Code
4105 Long Champ Dr
Austin, TX 78746

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tabrizi, Dona

Contributor address; City; State; Zip Code
1102 Claire Ave
Austin, TX 78703

Amount of
contribution (\$)

\$155.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Student

Employer (See Instructions)
N/A

Date

12/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Winzig, Elizabeth

Contributor address; City; State; Zip Code
2609 Baxter Dr
Austin, TX 78745

Amount of
contribution (\$)

\$10.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Volunteer

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: 12/12 Report: 14/32

2 FILER NAME Flannigan, James (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00629478

4 Date

12/12/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Witbrock, Michael**6** Contributor address; City; State; Zip Code
3911 Walnut Clay Dr
Austin, TX 78731**7** Amount of
contribution (\$)

\$30.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)
Scientists**10** Employer (See Instructions)
Cycorp, Inc.

Date

12/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wolff, DavidContributor address; City; State; Zip Code
1206 W 8th St
Austin, TX 78701Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zigrossi, PatContributor address; City; State; Zip Code
11300 Pickfair Dr
Austin, TX 78750Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
N/AEmployer (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.

1 PAGE # Schedule: 1/17 Report: 15/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/12/2014		5 Payee name American Printing and Mailing			
6 Amount (\$) \$1,424.08		7 Payee address City; State; Zip Code 1606 Headway Circle Austin, TX 78754			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GOTV Lit for Election Day <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/15/2014		Payee name Austin's Pizza			
Amount (\$) \$52.37		Payee address City; State; Zip Code 7301 N FM 620 Austin, TX 78726			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers/canvassers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/18/2014		Payee name Balcones Country Club			
Amount (\$) \$77.44		Payee address City; State; Zip Code 8600 Balcones Club Dr Austin, TX 78750			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> event fee for runoff fundraiser <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/16/2014		Payee name Christensen, Elizabeth			
Amount (\$) \$138.00		Payee address City; State; Zip Code PO Box 1792 Austin, TX 78767			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 2/17 Report: 16/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/17/2014		5 Payee name Clark, Margaret			
6 Amount (\$) \$204.00		7 Payee address City; State; Zip Code 4605 Avenue A #111 Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Cox Media Group			
Amount (\$) \$9.99		Payee address City; State; Zip Code 6205 Peachtree Dunwoody Rd Atlanta, GA 30328			
PURPOSE OF EXPENDITURE		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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/31/2014		Payee name Cox Media Group			
Amount (\$) \$9.99		Payee address City; State; Zip Code 6205 Peachtree Dunwoody Rd Atlanta, GA 30328			
PURPOSE OF EXPENDITURE		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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Davies, Will			
Amount (\$) \$675.00		Payee address City; State; Zip Code 4605 Avenue A 109 Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 3/17 Report: 17/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/15/2014	5 Payee name Facebook				
6 Amount (\$) \$780.54	7 Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook ads for early voting and election day <input type="checkbox"/> Check If Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/21/2014	Payee name Facebook				
Amount (\$) \$237.08	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> facebook ads for election day <input type="checkbox"/> Check If Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/07/2014	Payee name FedEx				
Amount (\$) \$21.09	Payee address City; State; Zip Code 13729 N Hwy 183 Austin, TX 78750				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> quarter page early voting sheets <input type="checkbox"/> Check If Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/08/2014	Payee name FedEx				
Amount (\$) \$20.10	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> runoff report <input type="checkbox"/> Check If Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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.

1 PAGE # Schedule: 4/17 Report: 18/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/08/2014		5 Payee name FedEx			
6 Amount (\$) \$10.98		7 Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CD for runoff report <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/09/2014		Payee name FedEx			
Amount (\$) \$52.47		Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printer ink, envelopes <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name FedEx			
Amount (\$) \$3.88		Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> paper cuts for early voting quarter page sheets <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name FedEx			
Amount (\$) \$23.82		Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> early voting quarter page sheets <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 5/17 Report: 19/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/30/2014		5 Payee name Flannigan, Jimmy			
6 Amount (\$) \$1,245.80		7 Payee address City; State; Zip Code 8601 Anderson Mill Rd #1023 Austin, TX 78729			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> repayment of loans and political expenditures made from personal funds <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/12/2014		Payee name H.E.B.			
Amount (\$) \$13.54		Payee address City; State; Zip Code 14028 N Hwy 183 Austin, TX 78717			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> snacks for volunteers/canvassers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/08/2014		Payee name Heinrich, Allison			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 9807 N FM 620 #21102 Austin, TX 78726			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign management nov 15 -31 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/21/2014		Payee name Heinrich, Allison			
Amount (\$) \$500.00		Payee address City; State; Zip Code 9807 N FM 620 #21102 Austin, TX 78726			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December campaign management (part 1) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 6/17 Report: 20/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/30/2014	5 Payee name Heinrich, Allison				
6 Amount (\$) \$750.00	7 Payee address City; State; Zip Code 9807 N FM 620 #21102 Austin, TX 78726				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign management - Dec 16		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/31/2014	Payee name Heinrich, Allison				
Amount (\$) \$3,572.46	Payee address City; State; Zip Code 9807 N FM 620 #21102 Austin, TX 78726				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign management		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/07/2014	Payee name Hot Breads				
Amount (\$) \$36.23	Payee address City; State; Zip Code 7318 McNeil Dr Ste 102 Austin, TX 78729				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers/canvassers		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/09/2014	Payee name Infocus Campaigns				
Amount (\$) \$897.57	Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> calls for early voting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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.

1 PAGE # Schedule: 7/17 Report: 21/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/12/2014		5 Payee name Infocus Campaigns			
6 Amount (\$) \$877.03		7 Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> calls for early voting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Infocus Campaigns			
Amount (\$) \$655.27		Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Election Day calls <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Jewett, Katy			
Amount (\$) \$937.50		Payee address City; State; Zip Code 13409 Campesina Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/08/2014		Payee name Kelly Graphics			
Amount (\$) \$1,643.34		Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mailer and postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 8/17 Report: 22/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/11/2014		5 Payee name Kelly Graphics			
6 Amount (\$) \$3,014.84		7 Payee address City: State: Zip Code 1409 Quaker Ridge Austin, TX 78746			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mailer and postage <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/16/2014		Payee name Kerbey Lane Cafe			
Amount (\$) \$68.00		Payee address City: State: Zip Code 13435 Hwy 183 Ste 415 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for staff breakfast meeting <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Kropf, Olivia			
Amount (\$) \$705.00		Payee address City: State: Zip Code 9805 Anderson Mill Rd Austin, TX 78750			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/12/2014		Payee name M & G Sign Placement Services			
Amount (\$) \$135.00		Payee address City: State: Zip Code 6410 Ponca Street Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> road sign installation <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 9/17 Report: 23/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/14/2014		5 Payee name Morton, Kristina			
6 Amount (\$) \$30.00		7 Payee address City; State; Zip Code 311 Nelray Blvd B Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/07/2014		Payee name Muangthai Thai Cuisine			
Amount (\$) \$35.00		Payee address City; State; Zip Code 13945 Hwy 183 Ste C80 Austin, TX 78717			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for campaign staff meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Murillo, Blanca			
Amount (\$) \$400.00		Payee address City; State; Zip Code 1515 Wickersham Ln Apt 213 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Assistance <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/22/2014		Payee name NationBuilder			
Amount (\$) \$87.00		Payee address City; State; Zip Code 448 S Hill St #200 Los Angeles, CA 90013			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Website - December <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 10/17 Report: 24/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/07/2014		5 Payee name Office Depot			
6 Amount (\$) \$42.29		7 Payee address City: State: Zip Code 4501 West Braker Lane Austin, TX 78759			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> paper, staples, and mounting tape <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Office Depot			
Amount (\$) \$29.22		Payee address City: State: Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> pens, tape, envelopes <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/13/2014		Payee name Office Max			
Amount (\$) \$9.73		Payee address City: State: Zip Code 4615 N Lamar Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mounting tape <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/16/2014		Payee name Rackspace			
Amount (\$) \$1,007.39		Payee address City: State: Zip Code 1 Fanatical Place City of Windcrest San Antonio, TX 78218			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> web services and marketing for Flannigan Can Fix It <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 11/17 Report: 25/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/17/2014		5 Payee name Rackspace			
6 Amount (\$) \$1,200.00		7 Payee address City; State; Zip Code 1 Fanatical Place City of Windcrest San Antonio, TX 78218			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> web services and marketing for Flannigan Can Fix It <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/18/2014		Payee name Rackspace			
Amount (\$) \$240.28		Payee address City; State; Zip Code 1 Fanatical Place City of Windcrest San Antonio, TX 78218			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> web services and marketing for Flannigan Can Fix It <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/30/2014		Payee name Rombado, Max			
Amount (\$) \$600.00		Payee address City; State; Zip Code 2624 Whitis Ave #6210 Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Internship Stipend - Runoff <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Salathe, Douglas			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 9101 Japonica Ct B Austin, TX 78748			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> field director salary - December <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 12/17 Report: 26/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/17/2014		5 Payee name Siever, Beth			
6 Amount (\$) \$750.00		7 Payee address City: State: Zip Code 9508 Meadowheath Austin, TX 78729			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Siever, Michael			
Amount (\$) \$1,020.00		Payee address City: State: Zip Code 9508 Meadowheath Austin, TX 78729			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/18/2014		Payee name Sorrells, Tim			
Amount (\$) \$645.00		Payee address City: State: Zip Code PO Box 302251 Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign finance and other compliance Nov 1- <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/17/2014		Payee name Spears, Eric			
Amount (\$) \$1,410.75		Payee address City: State: Zip Code 11825 Lansdowne Rd Austin, TX 78754			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> December paid canvassing, plus Nov 30 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 13/17 Report: 27/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/09/2014		5 Payee name Starbucks			
6 Amount (\$) \$17.05		7 Payee address City; State; Zip Code 504 W 24th Sr Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> coffee for campaign staff meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/08/2014		Payee name Strategic Payment Systems, Inc.			
Amount (\$) \$12.20		Payee address City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with credit card swiper payment gateway <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/08/2014		Payee name Strategic Payment Systems, Inc.			
Amount (\$) \$569.03		Payee address City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> statement fees for credit card processing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/31/2014		Payee name Strategic Payment Systems, Inc.			
Amount (\$) \$20.75		Payee address City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with online payment gateway <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 14/17 Report: 28/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/31/2014	5 Payee name Strategic Payment Systems, Inc.				
6 Amount (\$) \$518.06	7 Payee address City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> statement fees for credit card processing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/31/2014	Payee name Strategic Payment Systems, Inc.				
Amount (\$) \$10.00	Payee address City; State; Zip Code 45 Dan Rd Suite 100 Canton, MA 02021				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fees associated with credit card swiper		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/07/2014	Payee name Taco Deli				
Amount (\$) \$67.05	Payee address City; State; Zip Code 12001 Burnet Rd Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for volunteers/canvassers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/13/2014	Payee name Taco Deli				
Amount (\$) \$163.43	Payee address City; State; Zip Code 12001 Burnet Rd Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers/canvassers		
Complete ONLY if direct expenditure to benefit C/OH	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.

1 PAGE # Schedule: 15/17 Report: 29/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/16/2014		5 Payee name Third Base			
6 Amount (\$) \$42.00		7 Payee address City: State: Zip Code 13301 N Hwy 183 Austin, TX 78750			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for election watch party <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/12/2014		Payee name Thundercloud Subs			
Amount (\$) \$100.00		Payee address City: State: Zip Code 13776 N Hwy 183 Austin, TX 78750			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers/canvassers <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/14/2014		Payee name Thundercloud Subs			
Amount (\$) \$130.12		Payee address City: State: Zip Code 13776 N Hwy 183 Austin, TX 78750			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers/canvassers <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/16/2014		Payee name Thundercloud Subs			
Amount (\$) \$94.00		Payee address City: State: Zip Code 13776 N Hwy 183 Austin, TX 78750			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers/canvassers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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.

1 PAGE # Schedule: 16/17 Report: 30/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478	
4 Date 12/19/2014		5 Payee name Tuggey Calvoz, LLP			
6 Amount (\$) \$540.00		7 Payee address City: State: Zip Code 900 Congress Ave Suite 210 Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Legal Services		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign finance and other compliance prior to Nov 1 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 12/07/2014		Payee name Twitter			
Amount (\$) \$264.30		Payee address City: State: Zip Code 1355 Market St Suite 900 San Francisco, CA 94103			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> twitter ads for early voting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 12/14/2014		Payee name Twitter			
Amount (\$) \$175.68		Payee address City: State: Zip Code 1355 Market St Suite 900 San Francisco, CA 94103			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> twitter ads for early voting and election day <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 12/21/2014		Payee name Twitter			
Amount (\$) \$122.06		Payee address City: State: Zip Code 1355 Market St Suite 900 San Francisco, CA 94103			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> twitter ads for election day <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			

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.

1 PAGE # Schedule: 17/17 Report: 31/32		2 FILER NAME Flannigan, James (Mr.)		3 ACCOUNT # (TEC filers) 00629478
4 Date 12/11/2014	5 Payee name US Post Office -- Central Park West Station			
6 Amount (\$) \$29.40	7 Payee address City: State: Zip Code 3507 N Lamar Blvd Austin, TX 78705			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> stamps	
	<input type="checkbox"/> Check If Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____			

**CANDIDATE/OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

The Instruction Guide explains how to complete this form.

** Complete only if 'Report Type' on page 1 is marked 'Final Report' **

Page 32 of 32

1 C/OH NAME Flannigan, James (Mr.)**2 ACCOUNT #** (Ethics Commission filers)

00629478

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder**4 FILER WHO IS NOT AN OFFICEHOLDER**

** Complete A & B below only if you are not an officeholder **

A. CAMPAIGN FUNDS

Check only one:

☒ I do not have unexpended contributions or unexpended interest or income earned from political contributions.☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.**B. ASSETS**

Check only one:

☒ I do not retain assets purchased with political contributions or interest or other income from political contributions.☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204._____
Signature of Candidate**5 OFFICEHOLDER**

** Complete this section only if you are an officeholder **

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions._____
Signature of Officeholder

BANK RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 15th
contribution and expenditure report)

Name of candidate, officeholder or campaign committee: James "Jimmy" Flannigan

For each checking, savings or other financial institution account maintained during 2014, enter
the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Wells Fargo

Type of account: checking

The beginning balance: \$150.00

The ending balance: \$0.00

Enter the following information for checks issued on that account that have not cleared by
December 31:

Date	Payee	Amount

Enter the following information for checks received as contributions and deposited but dishonored
by the contributor's financial institution:

Date of receipt	Contributor	Amount

Amount of interest or dividends earned: _____

SCHEDULE ATX. 4 - attach to form C/OH (C&E)
Reference 2-2-25, Austin City Code

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal

A listing of checks received that have not been deposited into any account by December 31:

Date of receipt	Contributor	Amount