

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) 00006000	2 PAGE # 1 of 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Brigid		OFFICE USE ONLY Date Received 2012 JAN 17 PM 4 55 AUSTIN CITY CLERK RECEIVED Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Shea		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2604 Geraghty Ave. Austin, TX 78757		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Danette		
	NICKNAME LAST SUFFIX Chimenti		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 200 The Circle Austin, TX 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 912-8290		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 12/05/2011 THROUGH 12/31/2011		
10 ELECTION	ELECTION DATE Month Day Year 05/12/2012		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Shea, Brigid (Ms.)

14 ACCOUNT # (Ethics Commission filers)
0000600015 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
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)

\$

4,200.00

EXPENDITURE
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

1,000.00

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

\$

3,200.00

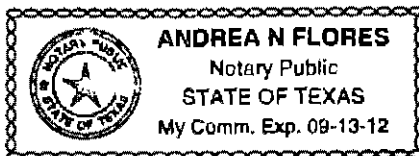
OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

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.



Brigid Shea
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said M. Brigid Shea, this the 11th day
of January, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/4 Report: 3/9

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

12/15/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Chimentl, Danette (Ms.)

6 Contributor address; City; State; Zip Code
200 The Circle
Austin, TX 78704

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Computer Consultant

10 Employer (See Instructions)
Self

Date

12/28/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hyatt, Diane (Ms.)

Contributor address; City; State; Zip Code
400 North Lowell Lane
Austin, TX 78733

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Texas Water Development Board

Date

12/13/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kitchen, Ann (Ms.)

Contributor address; City; State; Zip Code
2401 Briargrove
Austin, TX 78704

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/14/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Maxwell, Mary Gay (Ms.)

Contributor address; City; State; Zip Code
111 Laurel Ln
Austin, TX 78705

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/15/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
McAfee, Mark (Mr.)

Contributor address; City; State; Zip Code
6315 Spicewood Springs Rd
Austin, TX 78759

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Food Service/Catering

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/4 Report: 4/9	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 12/29/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNally, Eileen (Ms.) 6 Contributor address; City; State; Zip Code 902 Lund St 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) Artist		10 Employer (See Instructions) Self	
Date 12/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, William (Mr.) Contributor address; City; State; Zip Code 400 North Lowell Lane Austin, TX 78733	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) King Engineering	
Date 12/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pitzer, Greg (Mr.) Contributor address; City; State; Zip Code 902 Lund St Austin, TX 78704	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) Real Estate Broker		Employer (See Instructions) Self	
Date 12/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prisant, Martin (Mr.) Contributor address; City; State; Zip Code 508 Newhall Cove 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) President		Employer (See Instructions) SCDP, Inc.	
Date 12/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prisant, Nadia (Ms.) Contributor address; City; State; Zip Code 508 Newhall Cove 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) Manager		Employer (See Instructions) SCDP, Inc.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 3/4 Report: 5/9

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

12/19/2011

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Rather, Robin (Ms.)

6 Contributor address; City; State; Zip Code
805 Ethel Street
Austin, TX 78704

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Business Owner

10 Employer (See Instructions)
Collective Strength

Date

12/29/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sayle, Carol (Ms.)

Contributor address; City; State; Zip Code
3414 Lyons Rd
Austin, TX 78702

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smaha, Stephen (Mr.)

Contributor address; City; State; Zip Code
5003 Lucas Lane
Austin, TX 78731

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Investor

Employer (See Instructions)
Self

Date

12/31/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stanley, Alfred (Mr.)

Contributor address; City; State; Zip Code
1409 Hardouin Ave
Austin, TX 78703

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/24/2011

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tuschak, Robert (Mr.)

Contributor address; City; State; Zip Code
80 Red River St Apt 215
Austin, TX 78701

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

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: 4/4 Report: 6/9

2 FILER NAME Shea, Brigid (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00006000

4 Date

12/13/2011

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

Yznaga, Mark (Mr.)

6 Contributor address; City; State; Zip Code2401 Briargrove
Austin, TX 78704**7** Amount of
contribution (\$)

\$175.00

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

Date

12/31/2011

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

Zaretsky, Janet (Ms.)

Contributor address; City; State; Zip Code

13110 Bayfield Dr
Austin, TX 78727Amount of
contribution (\$)

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/2 Report: 7/9

2 FILER NAME Shea, Brigid (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00006000

4 TOTAL OF UNITEMIZED PLEDGES:

➡ ➡ ➡ ➡ ➡ ➡

\$

5 Date**6** Full name of pledgor☐ out-of-state PAC (ID# _____)

Camp, Marla (Ms.)

8 Amount of
pledge (\$)**9** In-kind description
(if applicable)

12/31/2011

7 Pledgor address;

City; State; Zip Code

1415 Newning Ave
Austin, TX 78704

\$50.00

(If travel outside of Texas, complete Schedule T) ☐**10** Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Ferchill, Cary (Mr.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/22/2011

Pledgor address;

City; State; Zip Code

2524 Tanglewood Trail
Austin, TX 78703

\$350.00

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

Principal occupation / Job title (See Instructions)

Lawyer

Employer (See Instructions)

Self

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Geiger, Carol (Ms.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/22/2011

Pledgor address;

City; State; Zip Code

2613 Nottingham Ln
Austin, TX 78704

\$150.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Holderness, Earl (Mr.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/31/2011

Pledgor address;

City; State; Zip Code

2943 Thousand Oaks Dr
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Holderness, Macy (Ms.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/31/2011

Pledgor address;

City; State; Zip Code

2943 Thousand Oaks Dr
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

PLEDGED CONTRIBUTIONS**SCHEDULE B**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #

Schedule: 2/2 Report: 8/9

2 FILER NAME Shea, Brigid (Ms.)**3** ACCOUNT # (Ethics Commission filers)
00006000**4** TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date**6** Full name of pledgor☐ out-of-state PAC (ID# _____)

Lafe, Larson (Mr.)

8 Amount of
pledge (\$)**9** In-kind description
(if applicable)

12/22/2011

7 Pledgor address; City; State; Zip Code
3505 Vara Dr
Austin, TX 78754

\$100.00

(If travel outside of Texas, complete Schedule T) ☐**10** Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Meredith, Susan (Ms.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/29/2011

Pledgor address; City; State; Zip Code
1206 E Live Oak St
Austin, TX 78704

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Business OwnerEmployer (See Instructions)
Go Green Squads, LLC

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Schagen, Tracy (Ms.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/31/2011

Pledgor address; City; State; Zip Code
8319 Haskel Dr
Austin, TX 78736

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Schneider, Robin (Ms.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/15/2011

Pledgor address; City; State; Zip Code
2609 Sherwood Lane
Austin, TX 78704

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Political OrganizerEmployer (See Instructions)
Texas Campaign for the Environment

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Smith, Tom (Mr.)

Amount of
pledge (\$)In-kind description
(if applicable)

12/15/2011

Pledgor address; City; State; Zip Code
1801 Westlake
Austin, TX 78746

\$190.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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.

1 PAGE # Schedule: 1/1 Report: 9/9		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 12/20/2011	5 Payee name Opinion Analysts, Inc.				
6 Amount (\$) \$1,000.00	7 Payee address City: State: Zip Code 906 Rio Grande St Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Polling		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

AUSTIN CITY CLERK
RECEIVED

2012 APR 11 PM 3 15

DISCLOSURE OF LOANS AND EXPENDITURES FROM PERSONAL FUNDS OF A
CANDIDATE OR OFFICEHOLDER

This report is for candidates or officeholders who loan personal funds to his/her campaign or make expenditures from personal funds in support of his or her campaign. The amounts loaned or expended shall be reported as follows.

Beginning on the date an individual becomes a candidate in a city election and continuing until midnight on the tenth day before a city election, a candidate shall report the new loans or expenditures cumulating to \$25,000 or more within seven business days. Additional loans or expenditures must be reported within seven business days each time they cumulate to \$25,000 or more. [2-2-27(A)(1)]

If the expenditures cumulating to \$25,000 or more occur during the period beginning on midnight on the 10th day before an election and ending at midnight on the day before the election, the report shall be filed within twenty-four hours with the City Clerk. [2-2-27(A)(2)]

Name of Candidate/Officeholder: Brigid Shea

Reporting Period:

- ☒ First day of candidacy – Midnight on the 10th day prior to city election
- ☐ Midnight on the 10th day before city election – Midnight on the day before election

Enter the following information concerning loans of personal funds to the campaign:

Amount of loan	Date of loan
\$25,000.00	4-2-12

SCHEDULE Y
Reference 2-2-27, Austin City Code

Enter the following information concerning the person or persons to whom expenditures were made from personal funds and the total amount, purpose and date of each expenditure:

Name	Street Address	Amount	Purpose	Date
N/A				

STATE OF TEXAS

VERIFICATION

I swear that the preceding disclosure of loans and expenditures from personal funds of a candidate or officeholder, filed herewith is in all things true and correct, and fully shows all information required to be reported by me pursuant to Section 2-2-32 City Code for the reporting period indicated.



Signature of Candidate/Officeholder

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) 00006000	2 PAGE # 1 of 130
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Brigid		OFFICE USE ONLY Date Received 2012 APR 12 PM 4 57 AUSTIN CITY CLERK RECEIVED
	NICKNAME LAST SUFFIX Shea		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2604 Geraghty Ave. Austin, TX 78757		Date Hand-delivered or Date Returned marked
			Receipt # Amount
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Danette		Date Processed
	NICKNAME LAST SUFFIX Chimenti		Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 200 The Circle Austin, TX 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 912-8290		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 01/01/2012 THROUGH 04/02/2012		
10 ELECTION	ELECTION DATE Month Day Year 05/12/2012	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Mayor

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Shea, Brigid (Ms.)

14 ACCOUNT # (Ethics Commission filers)
0000600015 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

\$

89.00

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

\$

70,817.00

EXPENDITURE
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

47,766.64

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

\$

53,441.43

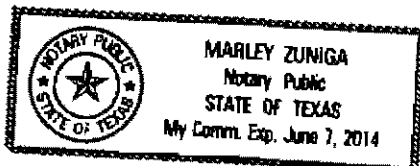
OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

25,000.00

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.



Brigid Shea
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said M. BRIGID SHEA, this the 12 day
of April, 2018, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/98 Report: 3/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date
02/18/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Abbot, Stephen (Mr.)

6 Contributor address; City; State; Zip Code
2703 Bonnie Rd
Austin, TX 78703

7 Amount of contribution (\$)
\$350.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Programmer

10 Employer (See Instructions)
IBM

Date
03/09/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Abrams, Adam (Mr.)

Contributor address; City; State; Zip Code
807 Baylor Unit C
Austin, TX 78703

Amount of contribution (\$)
\$20.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Acuna, Gerard (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 26499
Austin, TX 78755

Amount of contribution (\$)
\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
TRI Recycling Inc.

Date
02/15/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Adams, Jim (Mr.)

Contributor address; City; State; Zip Code
4000 Pinckney St
Austin, TX 78723

Amount of contribution (\$)
\$200.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
McCann Adams Studio

Date
03/30/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Addison, Douglas (Mr.)

Contributor address; City; State; Zip Code
1307 West 40th St
Austin, TX 78756

Amount of contribution (\$)
\$50.00

In-kind contribution description (if applicable)

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

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: 2/98 Report: 4/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ahern, Linda (Ms.) 6 Contributor address; City; State; Zip Code 302 Park Ln Austin, TX 78704	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Akers, Robert (Mr.) Contributor address; City; State; Zip Code 2311 Ridgeview Austin, TX 78704	Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Akins, Daniel (Mr.) Contributor address; City; State; Zip Code 283 Maple St Stowe, VT 05672	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Akins, Karen (Ms.) Contributor address; City; State; Zip Code 283 Maple St Stowe, VT 05672	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date 02/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aldrich, David (Mr.) Contributor address; City; State; Zip Code 1814 Ashby Ave Austin, TX 78704	Amount of contribution (\$) \$300.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) State of Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/98 Report: 5/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aleshire, Bill (Mr.) 6 Contributor address; City; State; Zip Code 3605 Shady Valley Dr Austin, TX 78739	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) Attorney		10 Employer (See Instructions) Riggs, Alshire & Ray PC	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander, Courtney (Ms.) Contributor address; City; State; Zip Code 912 Rocky Spring Rd Austin, TX 78753	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 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alsop, Marion (Ms.) Contributor address; City; State; Zip Code 2311 Pruett Austin, TX 78703	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) Retired		Employer (See Instructions) N/A	
Date 03/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alvarado, Delores (Ms.) Contributor address; City; State; Zip Code 605-B Oakland Ave Austin, TX 78703	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 02/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, James (Mr.) Contributor address; City; State; Zip Code 1213 West 12th 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) Owner		Employer (See Instructions) Anderson's Coffee Co	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The <i>INSTRUCTION GUIDE</i> explains how to complete this form.		1 PAGE # Schedule: 4/98 Report: 6/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Lee (Mr.) 6 Contributor address; City; State; Zip Code 18233 Snapdragon Dr Austin, TX 78735	7 Amount of contribution (\$) \$175.00	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 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andre, Sarah (Ms.) Contributor address; City; State; Zip Code 2318 Canterbury St Austin, TX 78702	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) Consultant		Employer (See Instructions) Self	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ansel, David (Mr.) Contributor address; City; State; Zip Code 2509 Thornton Rd Austin, TX 78704	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 03/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Appenzeller, Keith (Mr.) Contributor address; City; State; Zip Code 1123 Ranch Road Tarpon Springs, FL 34688	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) CEO		Employer (See Instructions) King Engineering	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arizpe, Caesar (Mr.) Contributor address; City; State; Zip Code 13009 Scofield Farms Dr Austin, TX 78727	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) Engineer		Employer (See Instructions) Arizpe	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/98 Report: 7/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armstrong, Gail (Mr.) 6 Contributor address; City; State; Zip Code 911 Daniel 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)		10 Employer (See Instructions)	
Date 02/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arndt, Timothy (Mr.) Contributor address; City; State; Zip Code 3915 Becker Ave Austin, TX 78751	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 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arnold, Bill (Mr.) Contributor address; City; State; Zip Code 3404 Southhill Circle 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) Retired		Employer (See Instructions) N/A	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arnold, Mary (Ms.) Contributor address; City; State; Zip Code 3404 Southhill Circle Austin, TX 78703	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) Retired		Employer (See Instructions) N/A	
Date 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arnold, Mary (Ms.) Contributor address; City; State; Zip Code 3404 Southhill Circle Austin, TX 78703	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) 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: 6/98 Report: 8/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Atherton, Leeann (Ms.) 6 Contributor address; City; State; Zip Code 3600 S. 2nd 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)		10 Employer (See Instructions)	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Atherton, Lorraine (Ms.) Contributor address; City; State; Zip Code 2009 Arpdale Austin, TX 78704	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) Copy Editor		Employer (See Instructions) Self	
Date 03/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Donna (Ms.) Contributor address; City; State; Zip Code 2003 Forrest Tr 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) Retired		Employer (See Instructions) N/A	
Date 03/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Heather (Ms.) Contributor address; City; State; Zip Code 1500 Raleigh Ave 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) Consultant		Employer (See Instructions) Navigant	
Date 02/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baker, Harris (Mr.) Contributor address; City; State; Zip Code 5000 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) Alternative Energy		Employer (See Instructions) HBH Operations	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/98 Report: 9/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/03/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baker, Mary Lincoln (Ms.) 6 Contributor address; City; State; Zip Code 3326 F 5/8th Rd Clifton, CO 81520	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) Business Owner		10 Employer (See Instructions) Slice O Life Bakery	
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baker, Roger (Mr.) Contributor address; City; State; Zip Code 1303 Bentwood Austin, TX 78722	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) Investor		Employer (See Instructions) Self	
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ballouz, Hala (Ms.) Contributor address; City; State; Zip Code 3405 Bee Creek Rd Spicewood, TX 78669	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) Self	
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barkley, John (Mr.) Contributor address; City; State; Zip Code 3118 Wheeler Austin, TX 78705	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) Business Owner		Employer (See Instructions) Barkley Houses	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barkley, John (Mr.) Contributor address; City; State; Zip Code 3118 Wheeler Austin, TX 78705	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) Business Owner		Employer (See Instructions) Barkley Houses	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/98 Report: 10/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barkley, Medora (Ms.) 6 Contributor address; City; State; Zip Code 3118 Wheeler Austin, TX 78705	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) Business Owner		10 Employer (See Instructions) Barkley Houses	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barkley, Medora (Ms.) Contributor address; City; State; Zip Code 3118 Wheeler Austin, TX 78705	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) Business Owner		Employer (See Instructions) Barkley Houses	
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, Jay (Mr.) Contributor address; City; State; Zip Code 1108 W 5th 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) Architect		Employer (See Instructions) Barnes Gromatzky Kosarek Architects	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barr, Rita (Ms.) Contributor address; City; State; Zip Code 4016 Austin Woods Dr Austin, TX 78759	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 03/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bartlett, Resa (Ms.) Contributor address; City; State; Zip Code 3601 Woodcutter's Way 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) Housewife		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: 9/98 Report: 11/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bartlett, Tim (Mr.) 6 Contributor address; City; State; Zip Code 3601 Woodcutter's Way Austin, TX 78746	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) Owner		10 Employer (See Instructions) Bartlett's Restaurant		
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baxter, Leah (Ms.) Contributor address; City; State; Zip Code 2702 McCullough Austin, TX 78703	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) Realtor		Employer (See Instructions) Tate Property		
Date 03/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beach, Thomas (Mr.) Contributor address; City; State; Zip Code 2006 Jesse E Segovia St Austin, TX 78702	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) Manager		Employer (See Instructions) Austin Canoe & Kayak		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bean, Molly (Ms.) Contributor address; City; State; Zip Code 2502 Barton Hills Dr 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) *		Employer (See Instructions)		
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beasley, Roger (Mr.) Contributor address; City; State; Zip Code 6503 Santolina Cove 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) Roger Beasley Mazda		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 10/98 Report: 12/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/21/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beck, Joyce (Ms.)		7 Amount of contribution (\$) \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 15911 Booth Circle Leander, TX 78641		(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 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beck, Ken (Mr.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 15911 Booth Circle Leander, TX 78641		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) N/A		
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bednar, Deaton (Mr.)		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4303 Avenue G Austin, TX 78751		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beinecke, Bridgette (Ms.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1111 Nueces Austin, TX 78701		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bellocchio, Brenda Lee (Ms.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 905 Robert E Lee Rd Austin, TX 78704		(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: 11/98 Report: 13/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/26/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bender, Hugh (Mr.)		7 Amount of contribution (\$) \$25.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 802 Harris Ave Austin, TX 78705		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 03/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bender, Sandi (Ms.)		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 802 Harris Ave Austin, TX 78705		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bercu, Steven (Mr.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4108 Burnet Rd Austin, TX 78756		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bernstein, Terri (Ms.)		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 434 West Roscoe #2B Chicago, IL 60657		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Betancourt, Carl (Mr.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1505 Travis Hts Blvd Austin, TX 78704		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions) Sheet Metal Worker			Employer (See Instructions) Dynamic Systems Inc		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/98 Report: 14/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date **5** Full name of contributor ☐ out-of-state PAC (ID# _____)
03/15/2012 Binder, Benjamin (Mr.)

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

\$200.00

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

6 Contributor address; City; State; Zip Code
720 S 41st St
Boulder, CO 80305

9 Principal occupation / Job title (See Instructions)
Consulting

10 Employer (See Instructions)
Self

Date Full name of contributor ☐ out-of-state PAC (ID# _____)
03/08/2012 Bird, Sarah (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$100.00

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

Contributor address; City; State; Zip Code
6102 Mountainclimb Dr
Austin, TX 78731

Principal occupation / Job title (See Instructions)
Writer

Employer (See Instructions)
Self

Date Full name of contributor ☐ out-of-state PAC (ID# _____)
03/31/2012 Bird, Sarah (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$250.00

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

Contributor address; City; State; Zip Code
6102 Mountainclimb Dr
Austin, TX 78731

Principal occupation / Job title (See Instructions)
*Writer

Employer (See Instructions)
Self

Date Full name of contributor ☐ out-of-state PAC (ID# _____)
02/21/2012 Black, James (Mr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$100.00

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

Contributor address; City; State; Zip Code
4414 Three Creek Trail
Spicewood, TX 78669

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC (ID# _____)
03/20/2012 Bledsoe, Missy (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$25.00

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

Contributor address; City; State; Zip Code
1808 Forestglade Dr
Austin, TX 78745

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: 13/98 Report: 15/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 01/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blythe, Sharon (Ms.) 6 Contributor address; City; State; Zip Code 9206 Brigadoon Cove Austin, TX 78750	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) CPA		10 Employer (See Instructions) State of Texas		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Borst, Gayle (Ms.) Contributor address; City; State; Zip Code 2313 W 8th St 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 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bottoms, Shirley (Ms.) Contributor address; City; State; Zip Code 3903 Ridgelea Dr Austin, TX 78731	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bourgeois, Greg (Mr.) Contributor address; City; State; Zip Code 4623 Trail West Austin, TX 78735	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 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boyden, Mark (Mr.) Contributor address; City; State; Zip Code 5900 Thames Dr 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)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 14/98 Report: 16/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

03/27/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Braddock, Cliff (Mr.)

6 Contributor address; City; State; Zip Code
13305 Lone Rider Trail
Austin, TX 78738

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bray, Charles (Mr.)

04/02/2012

Contributor address; City; State; Zip Code
1500 Easy St
Austin, TX 78746

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brim, Jay (Mr.)

02/08/2012

Contributor address; City; State; Zip Code
1309 Lost Creek Blvd
Austin, TX 78746

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brodnax, Pat (Ms.)

02/01/2012

Contributor address; City; State; Zip Code
1105 West Annie
Austin, TX 78704

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown, Charles (Mr.)

02/28/2012

Contributor address; City; State; Zip Code
3124 North Hills Dr #B100
Austin, TX 78731

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

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: 15/98 Report: 17/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/08/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bunch, Bill (Mr.) 6 Contributor address; City; State; Zip Code 1307 Oxford 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) Attorney		10 Employer (See Instructions) SOS Alliance	
Date 03/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burnham, Joan (Ms.) Contributor address; City; State; Zip Code 108 West 33rd St Austin, TX 78705	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)		Employer (See Instructions)	
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burton, Scott (Mr.) Contributor address; City; State; Zip Code 4509 Sinclair Ave Austin, TX 78756	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 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Carol (Ms.) Contributor address; City; State; Zip Code 3407 Tom Green St Austin, TX 78705	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 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cablao, Elena (Ms.) Contributor address; City; State; Zip Code 2005 Oakleaf Circle Austin, TX 78723	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/98 Report: 18/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campisi, Tony (Mr.) 6 Contributor address; City; State; Zip Code 1510 West North Loop #115 Austin, TX 78756	7 Amount of contribution (\$) \$12.00	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Canzoneri, Michael (Mr.) Contributor address; City; State; Zip Code 7 Palo Pinto Path Wimberley, TX 78676	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 03/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carbone, K.F. (Mr.) Contributor address; City; State; Zip Code 2710 West 49th 1/2 St Austin, TX 78731	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlson, Kim (Ms.) Contributor address; City; State; Zip Code 606 West Lynn St 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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartsonis, Ellen (Ms.) Contributor address; City; State; Zip Code 4200 Hycrest Dr Austin, TX 78759	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: 17/98 Report: 19/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/16/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Century, Jane (Ms.) 6 Contributor address; City; State; Zip Code 7327 Bryan St Philadelphia, PA 19119	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) Administrator		10 Employer (See Instructions) Penn-Century Inc	
Date 02/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cespedes, Carol (Ms.) Contributor address; City; State; Zip Code 7300 Callbram Ln Austin, TX 78736	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cespedes, Carol (Ms.) Contributor address; City; State; Zip Code 7300 Callbram Ln Austin, TX 78736	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 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chamberlain, Amy (Ms.) Contributor address; City; State; Zip Code 1307 West 40th St Austin, TX 78756	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 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chavis, Judy (Ms.) Contributor address; City; State; Zip Code 125 Sebastians Run Austin, TX 78738	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) Director		Employer (See Instructions) Dell	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/98 Report: 20/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chavis, Judy (Ms.) 6 Contributor address; City; State; Zip Code 125 Sebastians Run Austin, TX 78738	7 Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) *Director		10 Employer (See Instructions) Dell	
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chavis, Randy (Mr.) Contributor address; City; State; Zip Code 125 Sebastians Run Austin, TX 78738	Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) OpenText	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chavis, Randy (Mr.) Contributor address; City; State; Zip Code 125 Sebastians Run Austin, TX 78738	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *Director		Employer (See Instructions) OpenText	
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Stephen (Mr.) Contributor address; City; State; Zip Code 3306 Bonnie Rd Austin, TX 78703	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coats, Simon (Mr.) Contributor address; City; State; Zip Code 5009 Placard Pl Austin, TX 78731	Amount of contribution (\$) \$40.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
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: 19/98 Report: 21/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Cofer, Mary Elizabeth (Ms.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

04/02/2012

6 Contributor address; City; State; Zip Code
3306 Gentry Dr
Austin, TX 78746

\$20.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cohen, Aiden (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

02/18/2012

Contributor address; City; State; Zip Code
4305 Camacho St
Austin, TX 78723

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coldiron, Barbara (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

03/17/2012

Contributor address; City; State; Zip Code
6509 Marblewood
Austin, TX 78731

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coldiron, Ron (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

03/07/2012

Contributor address; City; State; Zip Code
6509 Marblewood
Austin, TX 78731

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coldiron, Ron (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

03/17/2012

Contributor address; City; State; Zip Code
6509 Marblewood
Austin, TX 78731

\$25.00

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

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: 20/98 Report: 22/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filters) 00006000	
4 Date 03/17/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Correa, Kathy (Ms.) 6 Contributor address; City; State; Zip Code 7809 Gault St Austin, TX 78757	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Craig, Ken (Mr.) Contributor address; City; State; Zip Code 913-B Sirocco Dr Austin, TX 78745	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 02/18/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crain, Bob (Mr.) Contributor address; City; State; Zip Code 7200 Comanche Trail Austin, TX 78732	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)		Employer (See Instructions)	
Date 03/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Creighton, Sondra (Ms.) Contributor address; City; State; Zip Code 6301 Bon Terra Dr Austin, TX 78731	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 03/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crews, Joe (Mr.) Contributor address; City; State; Zip Code 1606 Rockmore 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) Crews Law Firm, P.C.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/98 Report: 23/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/21/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cronk, Tom (Mr.) 6 Contributor address; City; State; Zip Code 2406 Westover Rd Austin, TX 78703	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) Marketing Director		10 Employer (See Instructions) Community Techknowledge Inc.	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crow, Dan (Mr.) Contributor address; City; State; Zip Code 2803 Down Cove 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)		Employer (See Instructions)	
Date 02/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crow, Dan (Mr.) Contributor address; City; State; Zip Code 2803 Down Cove 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)		Employer (See Instructions)	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crow, Michael (Mr.) Contributor address; City; State; Zip Code 8010 Bon Air 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)		Employer (See Instructions)	
Date 03/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael (Mr.) Contributor address; City; State; Zip Code 3307 Bryker Dr Austin, TX 78703	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) Mediator		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 22/98 Report: 24/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael (Mr.) 6 Contributor address; City; State; Zip Code 3307 Bryker Dr Austin, TX 78703	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) *Mediator		10 Employer (See Instructions) Self		
Date 03/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Czajkowski, Ronald (Mr.) Contributor address; City; State; Zip Code 1707 Spyglass Dr #77 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) Civil Engineer		Employer (See Instructions) City of Austin		
Date 02/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dabbs, Bobbie (Ms.) Contributor address; City; State; Zip Code 18233 Snapdragon Dr Austin, TX 78735	Amount of contribution (\$) \$175.00	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel, Harold (Mr.) Contributor address; City; State; Zip Code 3203 Cupid Dr. Austin, TX 78735	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) Project Manager		Employer (See Instructions) RMI		
Date 02/18/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Dick (Mr.) Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704	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) Biologist		Employer (See Instructions) UT Austin		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/98 Report: 25/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/26/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, James (Mr.) 6 Contributor address; City; State; Zip Code 4005 Rockledge Dr Austin, TX 78731	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) Health Care		10 Employer (See Instructions) Seton	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deal, Eric (Mr.) Contributor address; City; State; Zip Code 10703 McFarlie Cove Austin, TX 78750	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) Engineer		Employer (See Instructions) Cyclic Design	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deal, Eric (Mr.) Contributor address; City; State; Zip Code 10703 McFarlie Cove Austin, TX 78750	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) Engineer		Employer (See Instructions) Cyclic Design	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deal, Monica (Ms.) Contributor address; City; State; Zip Code 10703 McFarlie Cove Austin, TX 78750	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) Accountant		Employer (See Instructions) Cyclic Design	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deal, Monica (Ms.) Contributor address; City; State; Zip Code 10703 McFarlie Cove Austin, TX 78750	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) Accountant		Employer (See Instructions) Cyclic Design	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 24/98 Report: 26/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeHaan, Melissa (Ms.)		7 Amount of contribution (\$) \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1134 Eleanor St Austin, TX 78721			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Del Llano, Ann (Ms.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 6428 Austin, TX 78762			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Self		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dew, Eileen (Ms.)		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 221 Pedigree Dr Austin, TX 78748			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dew, James (Mr.)		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 221 Pedigree Dr Austin, TX 78748			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 01/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeYoung, Claire (Ms.)		Amount of contribution (\$) \$200.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 684236 Austin, TX 78768			(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: 25/98 Report: 27/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/17/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeYoung, Claire (Ms.) 6 Contributor address; City; State; Zip Code P.O. Box 684236 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) Retired		10 Employer (See Instructions) N/A	
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeYoung, Claire (Ms.) Contributor address; City; State; Zip Code P.O. Box 684236 Austin, TX 78768	Amount of contribution (\$) \$125.00	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 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dierks, Dianna (Ms.) Contributor address; City; State; Zip Code 2412 Enfield Rd #8 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 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DiLeo, Michael (Mr.) Contributor address; City; State; Zip Code 9 Niles Rd 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) Writer		Employer (See Instructions) Self	
Date 03/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Divine, Deda (Ms.) Contributor address; City; State; Zip Code P.O. Box 1724 Blanco, TX 78606	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/98 Report: 28/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dobson, Lynne (Ms.) 6 Contributor address; City; State; Zip Code 2208 Far Gallant Austin, TX 78746	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) Business Owner		10 Employer (See Instructions) Self	
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dobson, Lynne (Ms.) Contributor address; City; State; Zip Code 2208 Far Gallant Austin, TX 78746	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) Business Owner		Employer (See Instructions) Self	
Date 02/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donovan, Brian (Mr.) Contributor address; City; State; Zip Code 508 Genard St Austin, TX 78751	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 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Douglass, Mirsa (Ms.) Contributor address; City; State; Zip Code 2603 Geraghty Ave Austin, TX 78757	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)		Employer (See Instructions)	
Date 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Downer, Jane (Ms.) Contributor address; City; State; Zip Code 517 East Mary St Autin, TX 78704	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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/98 Report: 29/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/17/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doyle, Marisa (Ms.) 6 Contributor address; City; State; Zip Code 8515 Brodie Ln #1933 Austin, TX 78745	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)		10 Employer (See Instructions)	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dubose, Louis (Mr.) Contributor address; City; State; Zip Code 2312 Pruett St Austin, TX 78703	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, James (Mr.) Contributor address; City; State; Zip Code 360 Nueces St #2701 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) City Planner		Employer (See Instructions) Duncan Associates	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Katherine (Ms.) Contributor address; City; State; Zip Code 360 Nueces St #2701 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) Housewife		Employer (See Instructions) None	
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Echois, Catherine (Ms.) Contributor address; City; State; Zip Code 508 Harris Ave 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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/98 Report: 30/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/06/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eichsteadt, Harmony (Ms.) 6 Contributor address; City; State; Zip Code 1025 Ellingson Ln Austin, TX 78751	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 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellison, Christopher (Mr.) Contributor address; City; State; Zip Code 2500 Flora Cove 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) Professor		Employer (See Instructions) UT San Antonio	
Date 02/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellison, Newtrey (Mr.) Contributor address; City; State; Zip Code 2903 A Parker Ln Austin, TX 78741	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) Consultant		Employer (See Instructions) WebTV	
Date 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Englehardt-Cronk, Kathryn (Ms.) Contributor address; City; State; Zip Code 2406 Westover Rd Austin, TX 78703	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) CEO		Employer (See Instructions) Community Techknowledge Inc.	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Evangelista, Vania (Ms.) Contributor address; City; State; Zip Code 8700 Brodie Ln #1831 Austin, TX 78745	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) *Recruiter		Employer (See Instructions) Manpower	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 29/98 Report: 31/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/09/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fason, Maydelle (Ms.) 6 Contributor address; City; State; Zip Code 1607 Poquonock 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)			10 Employer (See Instructions)	
Date 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Faust, Sarah (Ms.) Contributor address; City; State; Zip Code 823 E 53rd St Austin, TX 78751		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) Kemp-Smith LLP	
Date 03/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Feldman, Cristen (Ms.) Contributor address; City; State; Zip Code 2506 Wordsworth Houston, TX 77030		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			Employer (See Instructions) Rusty Hardin & Associates	
Date 02/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fisher, Cindy (Ms.) Contributor address; City; State; Zip Code 1812 Vallejo St Austin, TX 78757		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)			Employer (See Instructions)	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fisher, Cindy (Ms.) Contributor address; City; State; Zip Code 1812 Vallejo St 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)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 30/98 Report: 32/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fisher, Cindy (Ms.) 6 Contributor address; City; State; Zip Code 1812 Vallejo St Austin, TX 78757	7 Amount of contribution (\$) \$35.00	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 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fleming, Helen (Ms.) Contributor address; City; State; Zip Code 1712 East Riverside Dr. Austin, TX 78741	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 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fluegel, Kathleen (Ms.) Contributor address; City; State; Zip Code 4715 3rd Ave Minneapolis, MN 55419	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) Executive Director		Employer (See Instructions) HRK Foundation	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fossum, Michael (Mr.) Contributor address; City; State; Zip Code 5100 Suburban Dr Austin, TX 78745	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 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Foster, Virginia (Ms.) Contributor address; City; State; Zip Code 1902 Forestglade Dr Austin, TX 78745	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) Teacher		Employer (See Instructions) AISD	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 31/98 Report: 33/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

04/02/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Fox, Marilyn (Ms.)

6 Contributor address; City; State; Zip Code
6400 Zadock Woods Dr
Austin, TX 78749

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Frensley, Nathalie (Ms.)

02/11/2012

Contributor address; City; State; Zip Code
5601 Montview St
Austin, TX 78756

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Research

Employer (See Instructions)
US Government

Date

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

03/08/2012

Contributor address; City; State; Zip Code
5732 Gorham Glen Ln
Austin, TX 78739

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fusco, Sarah (Ms.)

02/11/2012

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) ☐

Principal occupation / Job title (See Instructions)
Public Information

Employer (See Instructions)
Austin Energy

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fusco, Sarah (Ms.)

03/02/2012

Contributor address; City; State; Zip Code
1307 Oxford Ave.
Austin, TX 78704

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Public Information

Employer (See Instructions)
Austin Energy

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 32/98 Report: 34/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

03/16/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Galbraith, James (Mr.)

6 Contributor address; City; State; Zip Code
116 Laurel Ln
Austin, TX 78705

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)

10 Employer (See Instructions)

Date

04/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gallant, Danny (Mr.)

Contributor address; City; State; Zip Code
2607 Geraghty Ave
Austin, TX 78757

Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Galloway, Jessica (Ms.)

Contributor address; City; State; Zip Code
908 E 53rd St
Austin, TX 78751

Amount of
contribution (\$)

\$30.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gammon, Bill (Mr.)

Contributor address; City; State; Zip Code
8304 Zyle Rd
Austin, TX 78737

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self

Date

03/31/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Garcia, Rudy (Mr.)

Contributor address; City; State; Zip Code
1801 W 10th
Austin, TX 78703

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)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 33/98 Report: 35/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gary, Robert (Mr.) 6 Contributor address; City; State; Zip Code 1108 Morrow Austin, TX 78757	7 Amount of contribution (\$) \$35.00	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 03/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Georgette (Ms.) Contributor address; City; State; Zip Code 4439 North Hall St Dallas, TX 75219	Amount of contribution (\$) \$300.00	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geiger, Carol (Ms.) Contributor address; City; State; Zip Code 2613 Nottingham Ln 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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ghahremani, Kay (Ms.) Contributor address; City; State; Zip Code 3036 Thrushwood Dr Austin, TX 78757	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 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbons, Heidi (Ms.) Contributor address; City; State; Zip Code 613 Hearn St Austin, TX 78703	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: 34/98 Report: 36/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/17/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbons, Heidi (Ms.)		7 Amount of contribution (\$) \$25.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 613 Hearn St Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbons, Robert (Mr.)		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 613 Hearn St Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilbert, Bob (Mr.)		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4212 Bellvue Ave Austin, TX 78756			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Professor			Employer (See Instructions) UT Austin		
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilbert, Lizan (Ms.)		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4212 Bellvue Ave Austin, TX 78756			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Engineer			Employer (See Instructions) S J Louis		
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Glass, Bill (Mr.)		Amount of contribution (\$) \$35.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1701 Pheasant Roost Austin, TX 78758			(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: 35/98 Report: 37/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Glass, Pam (Ms.) 6 Contributor address; City; State; Zip Code 1701 Pheasant Roost Austin, TX 78758	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goldsmith, Kathleen (Ms.) Contributor address; City; State; Zip Code 2608 Addison Ave Austin, TX 78757	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 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goodrich, Ray (Mr.) Contributor address; City; State; Zip Code 1404 Red Bud Tr 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) Retired		Employer (See Instructions) N/A	
Date 03/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, William (Mr.) Contributor address; City; State; Zip Code 6103 Cary 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)		Employer (See Instructions)	
Date 03/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gould, Gary (Mr.) Contributor address; City; State; Zip Code P.O. Box 49015 Austin, TX 78765	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 36/98 Report: 38/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Ann (Ms.)		7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
		6 Contributor address; City; State; Zip Code 3815 Avenue H Austin, TX 78751			
				(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 03/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grasso, Tony (Mr.)		Amount of contribution (\$) \$10.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 1417 Brighton Bend Cedar Park, TX 78613			
				(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gray, Elizabeth (Ms.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 2100 Mountainview Rd Austin, TX 78703			
				(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gray, Natalie (Ms.)		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 1606 Treadwell Austin, TX 78704			
				(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Kelly (Ms.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 13401 Galleria Cir #117 Austin, TX 78738			
				(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Surgeon			Employer (See Instructions) Kerby Eye Center		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 37/98 Report: 39/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filters) 00006000	
4 Date 03/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Ken (Mr.)		7 Amount of contribution (\$) \$25.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 8415 Briarwood Ln Austin, TX 78757			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greene, Linda (Ms.)		Amount of contribution (\$) \$40.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2239 Cromwell Circle Austin, TX 78741			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grover, Rhonda (Ms.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2807 Pinewood Terrace Austin, TX 78757			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerrero, Linda (Ms.)		Amount of contribution (\$) \$80.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hadden, Karen (Ms.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 605 Carismatic Ln Austin, TX 78746			(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: 38/98 Report: 40/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haggard, Joe (Mr.) 6 Contributor address; City; State; Zip Code 4012 Ridgelea Dr Austin, TX 78731	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hale, Bryan (Mr.) Contributor address; City; State; Zip Code 1300 Windsor Rd 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) Chemist		Employer (See Instructions) Sachem	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hallahan, Michele (Ms.) Contributor address; City; State; Zip Code 1122 S 3rd St Austin, TX 78704	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)		Employer (See Instructions)	
Date 02/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hamilton, Dennis (Mr.) Contributor address; City; State; Zip Code 1958 Sharondale Avenue St Paul, MN 55113	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hamilton, Sandra (Ms.) Contributor address; City; State; Zip Code 6201 River Place Blvd. #13 Austin, TX 78730	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) *Marketing Manager		Employer (See Instructions) Dell	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 39/98 Report: 41/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/15/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hampel, Janet (Ms.) 6 Contributor address; City; State; Zip Code 1225 Hillside Ave Apt C 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)		10 Employer (See Instructions)		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hamza, Mariam (Ms.) Contributor address; City; State; Zip Code 3409 Esperanza Xing #7108 Austin, TX 78758	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) *		Employer (See Instructions)		
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Yvonne (Ms.) Contributor address; City; State; Zip Code 6206 Hillston Dr Austin, TX 78745	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Yvonne (Ms.) Contributor address; City; State; Zip Code 6206 Hillston Dr Austin, TX 78745	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 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanson Correa, Kathy (Ms.) Contributor address; City; State; Zip Code 7809 Gault St Austin, TX 78757	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: 40/98 Report: 42/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/23/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harkey, Beverley (Ms.) 6 Contributor address; City; State; Zip Code 2601 Albata Ave Austin, TX 78757	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 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Lisa (Ms.) Contributor address; City; State; Zip Code 4522 Avenue F Austin, TX 78751	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)			Employer (See Instructions)		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harrison, Mitchell (Mr.) Contributor address; City; State; Zip Code 2404 Forest 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)			Employer (See Instructions)		
Date 03/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatch, Tom (Mr.) Contributor address; City; State; Zip Code 702 San Antonio St 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) Architect			Employer (See Instructions) hatch + ulland owen architects		
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hausman, Susan (Ms.) Contributor address; City; State; Zip Code 3300 Govalle Ave Austin, TX 78702	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)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 41/98 Report: 43/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

02/01/2012

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

Hawkins, Andrew (Mr.)

6 Contributor address; City; State; Zip Code

1606 Treadwell St
Austin, TX 78704

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/02/2012

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

Heidel, Chris (Ms.)

Contributor address; City; State; Zip Code

2007 Pompton Dr
Austin, TX 78757

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2012

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

Hernandez, Robert (Mr.)

Contributor address; City; State; Zip Code

1602 Glencrest Dr
Austin, TX 78723

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Marketing

Employer (See Instructions)

Seda France

Date

02/01/2012

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

Herzele, Charlotte (Ms.)

Contributor address; City; State; Zip Code

3916 Ave H
Austin, TX 78751

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Lecturer

Employer (See Instructions)

UT Austin

Date

03/31/2012

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

Hill, Tracy (Ms.)

Contributor address; City; State; Zip Code

8600 Hwy 71 W #434
Austin, TX 78735

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

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: 42/98 Report: 44/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hirsch, Mike (Mr.) 6 Contributor address; City; State; Zip Code 1600 Texas Ave Austin, TX 78705	7 Amount of contribution (\$) \$10.00	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 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hodges, Jeff (Mr.) Contributor address; City; State; Zip Code 1112 West 9th Austin, TX 78703	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) Flooring			Employer (See Instructions) Austin Sand and Finish		
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hodges, Susan (Ms.) Contributor address; City; State; Zip Code 1807 Exposition Blvd 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) Accounting Assistant			Employer (See Instructions) Sherry Matthews Inc.		
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Houck, Micah (Mr.) Contributor address; City; State; Zip Code 125 Pueblo Luna NW Albuquerque, NM 87107	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Houston, Ora (Ms.) Contributor address; City; State; Zip Code 2207 East 22nd St Austin, TX 78722	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)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 43/98 Report: 45/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howle, Vel Anne (Ms.) 6 Contributor address; City; State; Zip Code 604 North Llano Fredericksburg, TX 78624	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 03/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huff, Don (Mr.) Contributor address; City; State; Zip Code 2703 Pegram Ave Austin, TX 78757	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 03/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huff, Linda (Ms.) Contributor address; City; State; Zip Code 2703 Pegram Ave Austin, TX 78757	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 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hulting, Jane (Ms.) Contributor address; City; State; Zip Code 8130 Cedar Road Elkins Park, PA 19027	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hynes, T.J. (Mr.) Contributor address; City; State; Zip Code 5206 Guadalupe St Austin, TX 78751	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

<i>The INSTRUCTION GUIDE explains how to complete this form.</i>			1 PAGE # Schedule: 44/98 Report: 46/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filters) 00006000	
4 Date 02/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ingle, Mary (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 3406 Duval St Austin, TX 78705	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) Tailor/Designer		10 Employer (See Instructions) Self		
Date 03/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ingle, Mary (Ms.) <hr/> Contributor address; City; State; Zip Code 3406 Duval St Austin, TX 78705	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Tailor/Designer		Employer (See Instructions) Self		
Date 03/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ireland, Shaun (Mr.) <hr/> Contributor address; City; State; Zip Code 3707 Manchaca Rd #117 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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iverson, Nancy (Ms.) <hr/> Contributor address; City; State; Zip Code 506 W 34th St 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)		Employer (See Instructions)		
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iverson, Richard (Mr.) <hr/> Contributor address; City; State; Zip Code 506 W 34th St 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)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 45/98 Report: 47/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ivey, Virginia (Ms.) 6 Contributor address; City; State; Zip Code 504 Pecan Grove Rd Austin, TX 78704	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 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack, Jeff (Mr.) Contributor address; City; State; Zip Code 2008 B Rabb Glen Rd 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 03/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jackson, Charlie (Mr.) Contributor address; City; State; Zip Code 11900 Metric Blvd Austin, TX 78758	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) Tech Consultant			Employer (See Instructions) Acceleros	
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jacobson, Mitchell (Mr.) Contributor address; City; State; Zip Code 2107 Bridle Path Austin, TX 78703	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) Director			Employer (See Instructions) University Of Texas	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaffe, Leslie (Ms.) Contributor address; City; State; Zip Code 1307 Silverhill Dr. Austin, TX 78746	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 46/98 Report: 48/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/17/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jarmon, Cody (Mr.) 6 Contributor address; City; State; Zip Code 8515 Brodie Ln Austin, TX 78745	7 Amount of contribution (\$) \$15.00	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, D'Ann (Ms.) Contributor address; City; State; Zip Code 1604 E 11th St Austin, TX 78702	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, D'Ann (Ms.) Contributor address; City; State; Zip Code 1604 E 11th St Austin, TX 78702	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 02/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, George (Mr.) Contributor address; City; State; Zip Code 6102 Mountainclimb Dr Austin, TX 78731	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, George (Mr.) Contributor address; City; State; Zip Code 6102 Mountainclimb Dr Austin, TX 78731	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 47/98 Report: 49/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/08/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kaselak, Lisa (Ms.) 6 Contributor address; City; State; Zip Code 2019 New York Austin, TX 78702	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 04/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly, Mary E. (Ms.) Contributor address; City; State; Zip Code 725 Patterson Ave Austin, TX 78703	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			Employer (See Instructions) Parula LLC		
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly, Mary Lee (Ms.) Contributor address; City; State; Zip Code 7406 Shadow Hill Dr. Austin, TX 78731	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly Daniel, Patti (Ms.) Contributor address; City; State; Zip Code 601 Hearn St #204 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 02/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kendall, Joe (Mr.) Contributor address; City; State; Zip Code 801 West Gibson 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)			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 48/98 Report: 50/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/03/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kent, Jenny (Ms.) 6 Contributor address; City; State; Zip Code 4305 Red Cloud Dr. Austin, TX 78759	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 03/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kent-McGlew, Ian (Mr.) Contributor address; City; State; Zip Code 4305 Red Cloud Dr. Austin, TX 78759	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 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kerr, Jacqueline (Ms.) Contributor address; City; State; Zip Code 1408 Travis Hts Blvd 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)			Employer (See Instructions)		
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kew, Roger (Mr.) Contributor address; City; State; Zip Code 106 Royal Way 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)			Employer (See Instructions)		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Key, Karrie (Ms.) Contributor address; City; State; Zip Code 8404 Briarwood Ln Austin, TX 78757	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: 49/98 Report: 51/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kidnew, Bob (Mr.) 6 Contributor address; City; State; Zip Code 200 Matzig Cove Buda, TX 78610	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) President			10 Employer (See Instructions) Texas Lehigh Cement Co		
Date 03/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kilcrease, Worth (Mr.) Contributor address; City; State; Zip Code 7504 Clove Cove 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 03/18/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kile, Karima (Ms.) Contributor address; City; State; Zip Code 8725 Foggy Mountain Dr Austin, TX 78736	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 04/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kimmelman, Tammy (Ms.) Contributor address; City; State; Zip Code 6910 Hart Ln #609 Austin, TX 78731	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 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kincaid, Mark (Mr.) Contributor address; City; State; Zip Code 3302 Glen Rose Dr Austin, TX 78731	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			Employer (See Instructions) Kincaid and Horton LLP		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 50/98 Report: 52/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Dana (Mr.) 6 Contributor address; City; State; Zip Code 420 Santa Alicia Solana Beach, CA 92075	7 Amount of contribution (\$) \$175.00	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Nancy (Ms.) Contributor address; City; State; Zip Code 420 Santa Alicia Solana Beach, CA 92075	Amount of contribution (\$) \$175.00	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 02/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kitchen, Ann (Ms.) Contributor address; City; State; Zip Code 2401 Briargrove Austin, TX 78704	Amount of contribution (\$) \$175.00	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		
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kitchen, Ann (Ms.) Contributor address; City; State; Zip Code 2401 Briargrove 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) Consultant		Employer (See Instructions) Self		
Date 03/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knazan, Lisa (Ms.) Contributor address; City; State; Zip Code 3936 12th Ave S Minneapolis, MN 55407	Amount of contribution (\$) \$37.50	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: 51/98 Report: 53/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/07/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Koitzsch, Adriana (Ms.) 6 Contributor address; City; State; Zip Code 3514 Enfield Rd 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) Homemaker		10 Employer (See Instructions) N/A	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kreps, Karen (Ms.) Contributor address; City; State; Zip Code 1711 Spyglass Dr #229 Austin, TX 78746	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Land, Linda (Ms.) Contributor address; City; State; Zip Code 1106 Upland Dr Austin, TX 78741	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lane, Lindsey (Ms.) Contributor address; City; State; Zip Code 2004 Woodrich Ave. 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)		Employer (See Instructions)	
Date 03/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lauterstein, David (Mr.) Contributor address; City; State; Zip Code 1405 West 39th 1/2 St Austin, TX 78756	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) Owner		Employer (See Instructions) Lauterstein-Conway Massage School	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 52/98 Report: 54/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/27/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lavine, Dick (Mr.) 6 Contributor address; City; State; Zip Code 803 Avondale Rd 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) Fiscal Analyst		10 Employer (See Instructions) Center for Public Policy Priorities	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leach, Dawn (Ms.) Contributor address; City; State; Zip Code 4614 Hank Ave Austin, TX 78745	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 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LeBoeuf, Beau (Mr.) Contributor address; City; State; Zip Code 1712 Bouldin Ave Austin, TX 78704	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) Advertising		Employer (See Instructions) Barking Pen	
Date 04/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leffler, John (Mr.) Contributor address; City; State; Zip Code 1410 Ruth Ave. Austin, TX 78757	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 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lehman, Chris (Mr.) Contributor address; City; State; Zip Code 1914 Larchmont Dr Austin, TX 78704	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) Real Estate Appraiser		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 53/98 Report: 55/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/17/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leonard, Brian (Mr.) 6 Contributor address; City; State; Zip Code 8212 Washita Dr Austin, TX 78749	7 Amount of contribution (\$) \$30.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Levendowski, Dennis (Mr.) Contributor address; City; State; Zip Code 3936 12th Ave S Minneapolis, MN 55407	Amount of contribution (\$) \$37.50 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Levin, Ilan (Mr.) Contributor address; City; State; Zip Code 1700 Bouldin Ave. Austin, TX 78704	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Levy, Mark (Mr.) Contributor address; City; State; Zip Code 6413 Cary Dr Austin, TX 78757	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Dawn (Ms.) Contributor address; City; State; Zip Code 4509 Edgemont Dr Austin, TX 78731	Amount of contribution (\$) \$175.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
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: 54/98 Report: 56/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filters) 00006000	
4 Date 02/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Fred (Mr.) 6 Contributor address; City; State; Zip Code 4509 Edgemont Dr Austin, TX 78731	7 Amount of contribution (\$) \$175.00	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lin, Lisa (Ms.) Contributor address; City; State; Zip Code 5404 Rain Creek Pkwy Austin, TX 78759	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) President		Employer (See Instructions) Texas College of TCM	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lin, Paul (Mr.) Contributor address; City; State; Zip Code 5404 Rain Creek Pkwy Austin, TX 78759	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 College of TCM	
Date 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lincoln, Anna (Ms.) Contributor address; City; State; Zip Code P.O. Box 244 Palisade, CO 81526	Amount of contribution (\$) \$75.00	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 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lincoln, Hannah (Ms.) Contributor address; City; State; Zip Code P.O. Box 543 Palisade, CO 81526	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 55/98 Report: 57/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/23/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lincoln, Kurt (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box 543 Palisade, CO 81526	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 02/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Longoria, Eduardo (Mr.) Contributor address; City; State; Zip Code 1508 Norris Dr 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 03/18/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowerre, Richard (Mr.) Contributor address; City; State; Zip Code 725 Patterson Ave Austin, TX 78703	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		Employer (See Instructions) Lowerre, Frederick, Perales, Allmon & Rockwell		
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lucas, Marcia (Ms.) Contributor address; City; State; Zip Code 1009 West Lynne Austin, TX 78703	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 03/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lynch, Nancy (Ms.) Contributor address; City; State; Zip Code 605 East 38th St Austin, TX 78705	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: 56/98 Report: 58/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MacFarlane, Andrew (Mr.) 6 Contributor address; City; State; Zip Code 9515 Longvale 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)		10 Employer (See Instructions)	
Date 03/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MacLaine, Nancy (Ms.) Contributor address; City; State; Zip Code 2302 Del Curto Rd 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) Computer Programmer		Employer (See Instructions) Tomium	
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MacLeod, Brian (Mr.) Contributor address; City; State; Zip Code 1521 Piedmont Ave Austin, TX 78757	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 02/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Madani, Farhad (Mr.) Contributor address; City; State; Zip Code 6906 Poncha Pass Austin, TX 78749	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)		Employer (See Instructions)	
Date 02/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Hilbert (Mr.) Contributor address; City; State; Zip Code 3304 Vintage Dr Round Rock, TX 78664	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: 57/98 Report: 59/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/12/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Lucille (Ms.) 6 Contributor address; City; State; Zip Code 3304 Vintage Dr Round Rock, TX 78664	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 04/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maples, Lauren (Ms.) Contributor address; City; State; Zip Code 1712 Bissel Ln Austin, TX 78745	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Hilda (Ms.) Contributor address; City; State; Zip Code 11503 Wington Dr. Austin, TX 78758	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) Development Director		Employer (See Instructions) NAMI Texas	
Date 03/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mather, Jean (Ms.) Contributor address; City; State; Zip Code 1611 Alameda Dr 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)		Employer (See Instructions)	
Date 02/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay (Ms.) Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	Amount of contribution (\$) \$75.00	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: 58/98 Report: 60/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/10/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay (Ms.) 6 Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	7 Amount of contribution (\$) \$75.00	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay (Ms.) Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mayton, Emma (Ms.) Contributor address; City; State; Zip Code 7101 Daugherty St 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) *		Employer (See Instructions)	
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McAfee, Melanie (Ms.) Contributor address; City; State; Zip Code 1170 Ridgeway Dr. Austin, TX 78702	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) Special Events		Employer (See Instructions) Barr Mansion	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCann, Charlotte (Ms.) Contributor address; City; State; Zip Code 3202 Sunny Ln Austin, TX 78731	Amount of contribution (\$) \$36.00	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: 59/98 Report: 61/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/06/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCaslin, Marjorie (Ms.) 6 Contributor address; City; State; Zip Code 1510 Bellaire Dr Austin, TX 78741		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 03/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDonald, Craig (Mr.) Contributor address; City; State; Zip Code 609 West 18th St 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)			Employer (See Instructions)	
Date 03/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDonald, Dora (Ms.) Contributor address; City; State; Zip Code 3001 Silverleaf Dr Austin, TX 78703		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 02/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGinnis, Colin (Mr.) Contributor address; City; State; Zip Code 114 Dunkirk Rd Baltimore, MD 21212		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 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGraw, Karen (Ms.) Contributor address; City; State; Zip Code 4315 Avenue C 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)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 60/98 Report: 62/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGuire, Steve (Mr.) 6 Contributor address; City; State; Zip Code 1708 Juliet 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)		10 Employer (See Instructions)	
Date 02/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIntosh, Michael (Mr.) Contributor address; City; State; Zip Code 8303 Polar Dr Austin, TX 78757	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKenzie, Ken (Mr.) Contributor address; City; State; Zip Code 4611 St Elmo Rd Austin, TX 78744	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 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKenzie, Kevin (Mr.) Contributor address; City; State; Zip Code 1707 Alguno Austin, TX 78757	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 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNamara, Daniel (Mr.) Contributor address; City; State; Zip Code 3502 Bridal Path Austin, TX 78703	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		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 61/98 Report: 63/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meador, Marlene (Ms.) 6 Contributor address; City; State; Zip Code 6905 Shoal Creek Blvd Austin, TX 78757	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 03/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mechling, Leea (Ms.) Contributor address; City; State; Zip Code 202 Fox Hollow Buda, TX 78610	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 02/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meeker, Jason (Mr.) Contributor address; City; State; Zip Code 6305 Amberly Place 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) Freelance Copywriter		Employer (See Instructions) Self	
Date 02/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meeker, Jason (Mr.) Contributor address; City; State; Zip Code 6305 Amberly Place 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) Freelance Copywriter		Employer (See Instructions) Self	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meeker, Jason (Mr.) Contributor address; City; State; Zip Code 6305 Amberly Place Austin, TX 78759	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) Freelance Copywriter		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 62/98 Report: 64/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melancon, Rebecca (Ms.) 6 Contributor address; City; State; Zip Code 509 East 38th St Austin, TX 78705	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melder, Bobbie (Ms.) Contributor address; City; State; Zip Code 805 Battle Bend Blvd Austin, TX 78745	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 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael, Andrea (Ms.) Contributor address; City; State; Zip Code 2504 Briargrove Dr 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)		Employer (See Instructions)		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mikheil, Sam (Mr.) Contributor address; City; State; Zip Code 305 Lowell Ln Austin, TX 78733	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Millea, Susan (Ms.) Contributor address; City; State; Zip Code 5806 Marilyn 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)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 63/98 Report: 65/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Brenda (Ms.)		7 Amount of contribution (\$) \$350.00		8 In-kind contribution description (if applicable)
		6 Contributor address; City; State; Zip Code 1002 Lorrain St Austin, TX 78703			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Homemaker			10 Employer (See Instructions) N/A		
Date 02/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Kathy (Ms.)		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 1403 Ulit Avenue Austin, TX 78702			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Online Strategies			Employer (See Instructions) Consumer's Union		
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Kathy (Ms.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 1403 Ulit Avenue Austin, TX 78702			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Online Strategies			Employer (See Instructions) Consumer's Union		
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Scott (Mr.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 1002 Lorrain St Austin, TX 78703			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Architect/Planner			Employer (See Instructions) Self		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mock, Jeffrey (Mr.)		Amount of contribution (\$) \$75.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 12345 Lamplight Village Ave #421 Austin, TX 78758			
			(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: 64/98 Report: 66/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moheet, Perwez (Mr.) 6 Contributor address; City; State; Zip Code 213 Varco Dr Austin, TX 78738	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) Finance Director		10 Employer (See Instructions) City of Kyle		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Duane (Mr.) Contributor address; City; State; Zip Code 1610 Barclay Dr Austin, TX 78746	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 03/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moorman, Ted (Mr.) Contributor address; City; State; Zip Code 9006 Scotland Well Cove Austin, TX 78750	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) High Tech Sales		Employer (See Instructions) Self		
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, Rick (Mr.) Contributor address; City; State; Zip Code 4405 Avenue H Austin, TX 78751	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, Daniel (Mr.) Contributor address; City; State; Zip Code 1329 Goldenrod Dr Naperville, IL 60540	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		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 65/98 Report: 67/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, Kerry (Ms.) 6 Contributor address; City; State; Zip Code 125 Pueblo Luna NW Albuquerque, NM 87107	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, Lori (Ms.) Contributor address; City; State; Zip Code 1329 Goldenrod Dr Naperville, IL 60540	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) *Housewife		Employer (See Instructions) N/A		
Date 03/09/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Hope (Ms.) Contributor address; City; State; Zip Code 8010 Bon Air 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) Consultant		Employer (See Instructions) Self		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moses, Teresa (Ms.) Contributor address; City; State; Zip Code 11011 Domain Dr. 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) *		Employer (See Instructions)		
Date 02/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mullin, Roy (Mr.) Contributor address; City; State; Zip Code 21935 Ann Showers Dr Elgin, TX 78621	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) Investment Advisor		Employer (See Instructions) Self		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 66/98 Report: 68/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphy, Adam (Mr.) 6 Contributor address; City; State; Zip Code 1200 E 11th St #304 Austin, TX 78702		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 03/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphy, Claudia (Ms.) Contributor address; City; State; Zip Code 682 Seville Ln Vacaville, CA 95688		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) Retired			Employer (See Instructions) N/A	
Date 03/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphy, Thomas (Mr.) Contributor address; City; State; Zip Code 682 Seville Ln Vacaville, CA 95688		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) Inspector			Employer (See Instructions) Department of Defense	
Date 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murrill, Jen (Ms.) Contributor address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757		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) Interior Designer			Employer (See Instructions) Laura Britt Design	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Musil, Bob (Mr.) Contributor address; City; State; Zip Code 8600 Irvington Ave Bethesda, MD 20817		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: 67/98 Report: 69/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nadler-Olenick, Rae (Ms.)		7 Amount of contribution (\$) \$150.00		8 In-kind contribution description (if applicable)
		6 Contributor address; City; State; Zip Code 1205 E 52nd St #101 Austin, TX 78723			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nassour, Jimmy (Mr.)		Amount of contribution (\$) \$175.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 4517 Grand Cypress Dr Austin, TX 78747			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nazor, Craig (Mr.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 11701 Barchetta Dr Austin, TX 78758			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Musician/Professor			Employer (See Instructions) Austin Community College		
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nelson, Denise (Ms.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 3308 Rogers Rd Austin, TX 78758			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newberger, David (Mr.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 2905 San Gabriel #218 Austin, TX 78705			
			(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: 68/98 Report: 70/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nichols, Shirley (Ms.) 6 Contributor address; City; State; Zip Code 4003 Knollwood Dr Austin, TX 78731	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 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Notzon, Mary Anne (Ms.) Contributor address; City; State; Zip Code 509 W 16th St Austin, TX 78701	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) None		Employer (See Instructions) N/A	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Notzon, Robert (Mr.) Contributor address; City; State; Zip Code 509 W 16th St Austin, TX 78701	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) Attorney		Employer (See Instructions) Self	
Date 03/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nunn, Karalei (Ms.) Contributor address; City; State; Zip Code 1506 Elm Street 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)		Employer (See Instructions)	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oakey, William (Mr.) Contributor address; City; State; Zip Code 1507 B Elton Ln Austin, TX 78703	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 69/98 Report: 71/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/23/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Connor, Tom (Mr.) 6 Contributor address; City; State; Zip Code 2878 Post Rock Rd Tarpon Springs, FL 34688	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) President		10 Employer (See Instructions) King Engineering	
Date 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oden, Michael (Mr.) Contributor address; City; State; Zip Code 3213 French Place Austin, TX 78722	Amount of contribution (\$) \$300.00	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) UT Austin	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ogle, Lani (Ms.) Contributor address; City; State; Zip Code 605 Natali St Austin, TX 78748	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orr, Lisa (Ms.) Contributor address; City; State; Zip Code 1502 Alta Vista Ave 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)		Employer (See Instructions)	
Date 03/18/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Osborne, Rusty (Mr.) Contributor address; City; State; Zip Code 115 South Lakehills Dr Austin, TX 78733	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: 70/98 Report: 72/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Overton, Linda (Ms.) 6 Contributor address; City; State; Zip Code 801 West Gibson 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)		10 Employer (See Instructions)		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paisley, Jennifer (Ms.) Contributor address; City; State; Zip Code 9004 Kimono Ridge Dr Austin, TX 78748	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) *Regional Development Manager		Employer (See Instructions) Cobb Fendley		
Date 02/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parker, James (Mr.) Contributor address; City; State; Zip Code 2705 Geraghty Ave Austin, TX 78757	Amount of contribution (\$) \$300.00	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) Polycom, Inc.		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paul, Aamir (Mr.) Contributor address; City; State; Zip Code 3409 Esperanza Xing #7108 Austin, TX 78758	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) *Executive Director NGCS		Employer (See Instructions) Dell Inc.		
Date 02/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peabody, Eric (Mr.) Contributor address; City; State; Zip Code 4107 Circletree Loop 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) Programmer		Employer (See Instructions) Crossroads Systems		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 71/98 Report: 73/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pederson, Alan (Mr.)		7 Amount of contribution (\$) \$25.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4710 Roundup Trail Austin, TX 78745			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perales, Marissa (Ms.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2104 Willow Austin, TX 78702			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perkins, Ira (Mr.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10600 McFarlie Cove Austin, TX 78750			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Petite, Albert (Mr.)		Amount of contribution (\$) \$175.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2814 Hannah Kay Ln Cedar Park, TX 78613			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillip, Kelvin (Mr.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3012 B South 4th St Austin, TX 78704			(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: 72/98 Report: 74/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pipkin, Stan (Mr.) 6 Contributor address; City; State; Zip Code 2100 B Wordsworth 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) Architect		10 Employer (See Instructions) Lighthouse Solar	
Date 03/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pool, Leslie (Ms.) Contributor address; City; State; Zip Code 4503 Shoal Creek Blvd 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)		Employer (See Instructions)	
Date 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pospisil, Karen (Ms.) Contributor address; City; State; Zip Code 200 Shelton Ranch Rd 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) Accountant		Employer (See Instructions) Roger Beasley Collision Center	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Powell, Lisa (Ms.) Contributor address; City; State; Zip Code 6114 Janey 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) Rancher		Employer (See Instructions) Self	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pulaski, Jane (Ms.) Contributor address; City; State; Zip Code 1200 Elm #212 Austin, TX 78703	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: 73/98 Report: 75/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rabago, Pamela (Ms.) 6 Contributor address; City; State; Zip Code 9512 Vera Cruz Austin, TX 78737	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 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ragland, Chuck (Mr.) Contributor address; City; State; Zip Code 2504 Briargrove Dr 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)		Employer (See Instructions)	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rahm, Mike (Mr.) Contributor address; City; State; Zip Code 801 Walter Ave Pflugerville, TX 78660	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) Mortgage Consultant		Employer (See Instructions) Mortgage One	
Date 04/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramos, Edwin (Mr.) Contributor address; City; State; Zip Code 1618 Pennsylvania Austin, TX 78702	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) Manager		Employer (See Instructions) Amersand Arts Supply	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramsey, Carol (Ms.) Contributor address; City; State; Zip Code 1900 Vallejo Austin, TX 78757	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 74/98 Report: 76/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ravel, Debra (Ms.) 6 Contributor address; City; State; Zip Code 11321 Alhambra Dr Austin, TX 78759	7 Amount of contribution (\$) \$45.00	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 03/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ray, David (Mr.) Contributor address; City; State; Zip Code 600 Texas Ave 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 03/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reece, Ray (Mr.) Contributor address; City; State; Zip Code 507 S 1st St #351 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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Lisa (Ms.) Contributor address; City; State; Zip Code 3910 Glengarry 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) Project Director		Employer (See Instructions) Adoption Coalition of Texas		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reilly, Karen (Ms.) Contributor address; City; State; Zip Code 11714 Alderhill Terrace San Diego, CA 92131	Amount of contribution (\$) \$175.00	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: 75/98 Report: 77/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reilly, Patrick (Mr.) 6 Contributor address; City; State; Zip Code 11714 Alderhill Terrace San Diego, CA 92131		7 Amount of contribution (\$) \$175.00	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 03/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reyes, Cora (Ms.) Contributor address; City; State; Zip Code 1109 Space Ln 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)			Employer (See Instructions)		
Date 03/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reyes, Joe (Mr.) Contributor address; City; State; Zip Code 1109 Space Ln 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)			Employer (See Instructions)		
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richardson, Phil (Mr.) Contributor address; City; State; Zip Code 3012 Thrushwood Dr Austin, TX 78757		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 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richey, Belinda (Ms.) Contributor address; City; State; Zip Code 1906 Rampart Cir Austin, TX 78727		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: 76/98 Report: 78/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/29/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richter, Dorothy (Ms.) 6 Contributor address; City; State; Zip Code 3901 Avenue G Austin, TX 78751	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rigby, Michael (Mr.) Contributor address; City; State; Zip Code 3935 Shoal Creek #108 Austin, TX 78756	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 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rittenhouse, Margaret (Ms.) Contributor address; City; State; Zip Code 915 Ken St 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)		Employer (See Instructions)		
Date 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robbins, Paul (Mr.) Contributor address; City; State; Zip Code P.O. Box 1374 Austin, TX 78767	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)		Employer (See Instructions)		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robbins, Paul (Mr.) Contributor address; City; State; Zip Code P.O. Box 1374 Austin, TX 78767	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: 77/98 Report: 79/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/17/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robertson, Anne (Ms.) 6 Contributor address; City; State; Zip Code 2223 Tarlton Cove Austin, TX 78746	7 Amount of contribution (\$) \$85.00	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 02/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robichaux, Nancy (Ms.) Contributor address; City; State; Zip Code 13500 White Tail Tr Austin, TX 78736	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 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rockenbaugh, Charles (Mr.) Contributor address; City; State; Zip Code 903 Philco Austin, TX 78745	Amount of contribution (\$) \$15.00	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 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodgers, Brian (Mr.) Contributor address; City; State; Zip Code 1112 West 9th 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) Real Estate		Employer (See Instructions) Self	
Date 03/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rooks, Steven (Mr.) Contributor address; City; State; Zip Code 9421 Linkmeadow Dr Austin, TX 78748	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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 78/98 Report: 80/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rooks, Steven (Mr.) 6 Contributor address; City; State; Zip Code 9421 Linkmeadow Dr Austin, TX 78748	7 Amount of contribution (\$) \$5.00	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 03/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roothaan, Susan (Ms.) Contributor address; City; State; Zip Code 6404 Wilber 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) Executive Director		Employer (See Instructions) A Nurtured World	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosendahl, Stephanie (Ms.) Contributor address; City; State; Zip Code 2800 Waymaker Way #27 Austin, TX 78746	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 02/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenthal, Chip (Mr.) Contributor address; City; State; Zip Code 8313 Franwood Ln Austin, TX 78757	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 02/18/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rowan, James (Mr.) Contributor address; City; State; Zip Code 4212 Far West Blvd Austin, TX 78731	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 79/98 Report: 81/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ruiz, Crispin (Ms.) 6 Contributor address; City; State; Zip Code 408 Whitetail Dr. Manchaca, TX 78652		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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan, Brenda (Ms.) Contributor address; City; State; Zip Code 8212 Washita Dr Austin, TX 78749		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)			Employer (See Instructions)	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sakota, Gigio (Mr.) Contributor address; City; State; Zip Code 1253 6th St Santa Monica, CA 90601		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 04/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salazar, Elaine (Ms.) Contributor address; City; State; Zip Code 1618 Pennsylvania Austin, TX 78702		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) President/CEO			Employer (See Instructions) Amperand Art Supply	
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salinas, Carlos (Mr.) Contributor address; City; State; Zip Code 2504 Keating Ln Austin, TX 78703		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)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 80/98 Report: 82/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sanders, Jennifer (Ms.) 6 Contributor address; City; State; Zip Code 1205 Rolling Ridge Dr Round Rock, TX 78665	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) *		10 Employer (See Instructions)	
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sandomirsky, Sharon (Ms.) Contributor address; City; State; Zip Code 2500 Flora Cove 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) Retired		Employer (See Instructions) N/A	
Date 03/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sauve, Linda (Ms.) Contributor address; City; State; Zip Code 11209 Cherisse Austin, TX 78739	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) Homemaker		Employer (See Instructions) N/A	
Date 03/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sauve, Paul (Mr.) Contributor address; City; State; Zip Code 11209 Cherisse Austin, TX 78739	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) Surveyor		Employer (See Instructions) Austin Spatial	
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sawyer, Peter (Mr.) Contributor address; City; State; Zip Code 3506 Far View Dr Austin, TX 78730	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 81/98 Report: 83/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

02/01/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Scanlan, Nancy (Ms.)

6 Contributor address; City; State; Zip Code
4513 Balcones Dr.
Austin, TX 78731

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
N/A

Date

03/16/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scanlan, Nancy (Ms.)

Contributor address; City; State; Zip Code
4513 Balcones Dr.
Austin, TX 78731

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

03/26/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Schenker, Melissa (Ms.)

Contributor address; City; State; Zip Code
1802 Brackenridge Dr
Austin, TX 78704

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

02/23/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sengelmann, Dale (Mr.)

Contributor address; City; State; Zip Code
1107 West 9th St
Austin, TX 78703

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Landscape Design

Employer (See Instructions)
Self

Date

02/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Senor, Robin (Ms.)

Contributor address; City; State; Zip Code
2607 Geraghty Ave
Austin, TX 78757

Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)

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

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: 82/98 Report: 84/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Severin, Paul (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box 302526 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)		10 Employer (See Instructions)	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Dave (Mr.) Contributor address; City; State; Zip Code 1801 Rio Grande #101 Austin, TX 78701	Amount of contribution (\$) \$75.00	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 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shea, Tim (Mr.) Contributor address; City; State; Zip Code 772 Ashley Ln NE Thompson, ND 58278	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) Simulation Coordinator		Employer (See Instructions) University of North Dakota	
Date 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shelton, Kaley (Ms.) Contributor address; City; State; Zip Code 4105 Great Plains Dr Austin, TX 78735	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 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shurman, Chris (Mr.) Contributor address; City; State; Zip Code 3106 Lafayette Ave Austin, TX 78722	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: 83/98 Report: 85/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/26/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sikes, David (Mr.) 6 Contributor address; City; State; Zip Code 1419 Dwyce Dr Austin, TX 78757	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Singh, Sandeepkumar (Mr.) Contributor address; City; State; Zip Code 4600 Monterey Oaks Austin, TX 78749	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 02/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sittler, Wolf (Mr.) Contributor address; City; State; Zip Code 1403 Kenwood Ave. 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)		Employer (See Instructions)		
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Slater, Mark (Mr.) Contributor address; City; State; Zip Code 10545 Rome Ave NYA, MN 55397	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 01/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sloan, Clay (Mr.) Contributor address; City; State; Zip Code 4306 Ramsey Ave Austin, TX 78756	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) VERA		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 84/98 Report: 86/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/09/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Bill (Mr.) 6 Contributor address; City; State; Zip Code 2106 Brooklyn 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)		10 Employer (See Instructions)		
Date 02/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Dan (Mr.) Contributor address; City; State; Zip Code 6807 Hardy Dr #4 Austin, TX 78757	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, David (Mr.) Contributor address; City; State; Zip Code P.O. Box 537 Austin, TX 78767	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 02/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Ted (Mr.) Contributor address; City; State; Zip Code 465 South 15th St San Jose, CA 95112	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Theodore (Mr.) Contributor address; City; State; Zip Code 465 South 15th St San Jose, CA 95112	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)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 85/98 Report: 87/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smolen, Paul (Mr.) 6 Contributor address; City; State; Zip Code 3812 Cherrywood Rd Austin, TX 78722		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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smoot, Monica (Ms.) Contributor address; City; State; Zip Code 3033 Thrushwood Dr Austin, TX 78757		Amount of contribution (\$) \$75.00	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smoot, Robert (Mr.) Contributor address; City; State; Zip Code 3033 Thrushwood Dr Austin, TX 78757		Amount of contribution (\$) \$75.00	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sorrells, Debora (Ms.) Contributor address; City; State; Zip Code 4707 Oakmont Blvd Austin, TX 78731		Amount of contribution (\$) \$75.00	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speir, Stephen (Mr.) Contributor address; City; State; Zip Code 1225 Corona Dr Austin, TX 78723		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)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 86/98 Report: 88/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sprute, Dana (Ms.) 6 Contributor address; City; State; Zip Code 5109 Turnabout Ln Austin, TX 78731	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) Physician		10 Employer (See Instructions) Seton Family of Hospitals	
Date 03/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) St. Romain, Beth (Ms.) Contributor address; City; State; Zip Code 2711 Greenlawn Pkwy Austin, TX 78757	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 03/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) St. Romain, Malcolm (Mr.) Contributor address; City; State; Zip Code 2711 Greenlawn Pkwy Austin, TX 78757	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 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stanford, Blake (Mr.) Contributor address; City; State; Zip Code 4906 Tortuga Place 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) President/CEO		Employer (See Instructions) Southwest Human Development	
Date 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stanford, Kristi (Ms.) Contributor address; City; State; Zip Code 4906 Tortuga Place 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) Vice-President		Employer (See Instructions) Culligan Water	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 87/98 Report: 89/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stein, Eric (Mr.) 6 Contributor address; City; State; Zip Code 6112 Highland Hills Dr Austin, TX 78731	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) *Tax Consultant		10 Employer (See Instructions) Ryan	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stein, Shari (Ms.) Contributor address; City; State; Zip Code 6112 Highland Hills 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) *Housewife		Employer (See Instructions) N/A	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steinhardt, Peter (Mr.) Contributor address; City; State; Zip Code 4518 Apache Pass 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)		Employer (See Instructions)	
Date 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stowell, Albert (Mr.) Contributor address; City; State; Zip Code P.O. Box 1723 Austin, TX 78767	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) Retired		Employer (See Instructions) N/A	
Date 03/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Strecker, Barbara (Ms.) Contributor address; City; State; Zip Code 6611 Jamaica Ct Austin, TX 78757	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: 88/98 Report: 90/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/21/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Strickland, Linda (Ms.)		7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 9607 Vista View Dr. Austin, TX 78750			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Summers, Hillary (Ms.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2401 Woodmont Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) *Pilates			Employer (See Instructions) Self		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Summers, Robert (Mr.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2401 Woodmont Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) *Attorney			Employer (See Instructions) Hohman Taube & Summers		
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swafford, Robert (Mr.)		Amount of contribution (\$) \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2003 South Lamar #8 Austin, TX 78704			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swearingen, Scott (Mr.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1900 Forestglade Austin, TX 78745			(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: 89/98 Report: 91/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taniguchi, Evan (Mr.) 6 Contributor address; City; State; Zip Code 2905 Pearl St Austin, TX 78705	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) Architect		10 Employer (See Instructions) Taniguchi Architects		
Date 03/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tannehill, Catherine (Ms.) Contributor address; City; State; Zip Code 9009 Marybank 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)		Employer (See Instructions)		
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tassin, Kerey (Ms.) Contributor address; City; State; Zip Code 11609 Big Trail Austin, TX 78759	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tatum, Vickie (Ms.) Contributor address; City; State; Zip Code 2407 West 10th St Austin, TX 78703	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 03/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taylor, Jay (Mr.) Contributor address; City; State; Zip Code 3403 Brangus Rd Georgetown, TX 78628	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) Engineer		Employer (See Instructions) Schneider Electric		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 90/98 Report: 92/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tebcherany, Dina (Ms.) 6 Contributor address; City; State; Zip Code 4517 Grand Cypress Dr Austin, TX 78747	7 Amount of contribution (\$) \$175.00	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 03/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tevis, Terry (Ms.) Contributor address; City; State; Zip Code 11614 Fast Horse Dr Austin, TX 78759	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 04/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas, Meredith (Ms.) Contributor address; City; State; Zip Code 6818 Daugherty St 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)		Employer (See Instructions)	
Date 03/09/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas, Randall (Mr.) Contributor address; City; State; Zip Code 908 E 45th St Austin, TX 78751	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) NOV	
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tiemann, Donna (Ms.) Contributor address; City; State; Zip Code 3203 Cupid Dr Austin, TX 78735	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) Project Manager		Employer (See Instructions) Barley & Pfeiffer Architects	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 91/98 Report: 93/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tolleson, Mike (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 2106 E MLK Austin, TX 78702	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 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Travis, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code 2609 Geraghty Ave Austin, TX 78757	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 03/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trybus, Kaye (Ms.) <hr/> Contributor address; City; State; Zip Code 1704 Kerr Austin, TX 78704	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 04/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tuschak, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code 80 Red River St Apt 215 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)			Employer (See Instructions)		
Date 02/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Umphress, John (Mr.) <hr/> Contributor address; City; State; Zip Code 2604 Geraghty Ave 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) Green Building and Sustainability			Employer (See Instructions) Austin Energy		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 92/98 Report: 94/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Umphress, Robert (Mr.) 6 Contributor address; City; State; Zip Code 10194 Vistadale Dr Dallas, TX 75238		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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Urban, Alison (Ms.) Contributor address; City; State; Zip Code 12712 Twisted Briar Ln Austin, TX 78729		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) *			Employer (See Instructions)	
Date 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Os, David (Mr.) Contributor address; City; State; Zip Code 7700 Shoal Creek Blvd Austin, TX 78757		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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Os, Rachael (Ms.) Contributor address; City; State; Zip Code 7700 Shoal Creek Blvd Austin, TX 78757		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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vasek, Jim (Mr.) Contributor address; City; State; Zip Code 2102 Cypress Pt E Austin, TX 78746		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: 93/98 Report: 95/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waelbroeck, Francois (Mr.) 6 Contributor address; City; State; Zip Code 1306 E 2nd St Austin, TX 78702	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 03/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Amanda (Ms.) Contributor address; City; State; Zip Code 2006 Jesse E Segovia St Austin, TX 78702	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) Teacher		Employer (See Instructions) AISD	
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Jerry Jeff (Mr.) Contributor address; City; State; Zip Code 1306 Lorrain 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) Musician		Employer (See Instructions) Self/Tried & True Music	
Date 02/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Lee (Mr.) Contributor address; City; State; Zip Code P.O. Box 4279 Austin, TX 78765	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) Professor		Employer (See Instructions) UT Austin	
Date 03/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Susan (Ms.) Contributor address; City; State; Zip Code 1306 Lorrain 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) Manager		Employer (See Instructions) Tried & True Music	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 94/98 Report: 96/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Suzanna (Ms.) 6 Contributor address; City; State; Zip Code 1512 Eva Street 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) CPA		10 Employer (See Instructions) Self		
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walton, Cory (Mr.) Contributor address; City; State; Zip Code 1701 Bouldin 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) Marketing Communications		Employer (See Instructions) Emerson		
Date 03/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walton, Cory (Mr.) Contributor address; City; State; Zip Code 1701 Bouldin Ave Austin, TX 78704	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) Marketing Communications		Employer (See Instructions) Emerson		
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watson, John (Mr.) Contributor address; City; State; Zip Code 1004 Red Bud Trail Austin, TX 78746	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 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weed, Betty (Ms.) Contributor address; City; State; Zip Code 2218 Alta Vista Avenue Austin, TX 78704	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) Researcher		Employer (See Instructions) Texas Education Agency		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 95/98 Report: 97/130

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

03/21/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Weeks, Allen (Mr.)

6 Contributor address; City; State; Zip Code
7302 Meador Ave
Austin, TX 78752

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)

10 Employer (See Instructions)

Date

03/18/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Weldon, Matt (Mr.)

Contributor address; City; State; Zip Code
9808 Grand Oak Dr
Austin, TX 78750

Amount of
contribution (\$)

\$30.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wicall, Kay (Ms.)

Contributor address; City; State; Zip Code
4301 Mountainclimb Dr
Austin, TX 78731

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wicce, Kunda (Ms.)

Contributor address; City; State; Zip Code
6607 Willamette Dr
Austin, TX 78723

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/31/2012

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

Contributor address; City; State; Zip Code
2605 Pembroke Tr
Austin, TX 78731

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

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: 96/98 Report: 98/130	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 03/31/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Chad (Mr.) 6 Contributor address; City; State; Zip Code 7500 Greenhaven Dr Austin, TX 78757	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 03/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Ellen (Ms.) Contributor address; City; State; Zip Code 802 E 47th St Austin, TX 78751	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) Property Management		Employer (See Instructions) Self		
Date 02/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Jackson (Mr.) Contributor address; City; State; Zip Code 1904 W 39th Austin, TX 78731	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 01/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Susan (Ms.) Contributor address; City; State; Zip Code 4306 Ramsey Ave Austin, TX 78756	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) Solar Austin		
Date 03/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Willis, Mary (Ms.) Contributor address; City; State; Zip Code 98 San Jacinto Blvd 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) Author		Employer (See Instructions) Self		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 97/98 Report: 99/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wogan, David (Mr.) 6 Contributor address; City; State; Zip Code 4609 Caswell Ave. Austin, TX 78751	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) Engineer		10 Employer (See Instructions) Austin Energy	
Date 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wood, Joel (Mr.) Contributor address; City; State; Zip Code 5215 Bloomsbury Way Bryan, TX 77802	Amount of contribution (\$) \$175.00	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 03/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wood, Pamela (Ms.) Contributor address; City; State; Zip Code 5215 Bloomsbury Way Bryan, TX 77802	Amount of contribution (\$) \$175.00	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 03/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woolridge, Greg (Mr.) Contributor address; City; State; Zip Code 2208 Far Gallant Austin, TX 78746	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) Business Owner		Employer (See Instructions) Self	
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woolridge, Greg (Mr.) Contributor address; City; State; Zip Code 2208 Far Gallant Austin, TX 78746	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) Business Owner		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 98/98 Report: 100/130	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 02/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Worley, John (Mr.) 6 Contributor address; City; State; Zip Code 4106 Avenue A Austin, TX 78751			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 03/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yahiel, Dan (Mr.) Contributor address; City; State; Zip Code 3908 Glengarry Dr Austin, TX 78731			Amount of contribution (\$) \$75.00	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 02/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yznaga, Mark (Mr.) Contributor address; City; State; Zip Code 2401 Briargrove Austin, TX 78704			Amount of contribution (\$) \$175.00	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	
Date 03/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zandan, Peter (Mr.) Contributor address; City; State; Zip Code 98 San Jacinto Blvd 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) Consultant				Employer (See Instructions) Self	

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 101/130	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 TOTAL OF UNITEMIZED LOANS: ⇔⇔⇔⇔⇔⇔		\$	
5 Date of loan 04/02/2012	7 Name of lender Shea, Brigid (Ms.) <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$) \$25,000.00	
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757	10 Interest rate N/A	
		11 Maturity date 05/12/2012	
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)	
20 Principal Occupation		21 Employer	

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: 1/27 Report: 102/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/08/2012	5 Payee name 1&1 Internet Inc.				
6 Amount (\$) \$51.87	7 Payee address City; State; Zip Code 701 Lee Road Suite 300 Chesterbrook, PA 19087				
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"/> Campaign Email Hosting		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/14/2012	Payee name Arriba News				
Amount (\$) \$200.00	Payee address City; State; Zip Code P.O. Box 12865 Austin, TX 78711				
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"/> Political Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/05/2012	Payee name Austin Tejano Democrats				
Amount (\$) \$20.00	Payee address City; State; Zip Code 2544 Stoutwood Cir Austin, TX 78745				
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"/> Membership Dues		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/14/2012	Payee name Beers, Stephen (Mr.)				
Amount (\$) \$1,180.00	Payee address City; State; Zip Code 3201 Darnell Dr Austin, TX 78745				
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"/> Contract Labor for Research		
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: 2/27 Report: 103/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 01/05/2012	5 Payee name Blue Utopia				
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code P.O. Box 4486 Seattle, WA 98194				
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"/> Campaign Online Donation and Email Service		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/13/2012	Payee name Blue Utopia				
Amount (\$) \$637.50	Payee address City; State; Zip Code P.O. Box 4486 Seattle, WA 98194				
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"/> Campaign Online Donation and Email Service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/01/2012	Payee name Blue Utopia				
Amount (\$) \$475.00	Payee address City; State; Zip Code P.O. Box 4486 Seattle, WA 98194				
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"/> Campaign Online Donation and Email Service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/01/2012	Payee name Blue Utopia				
Amount (\$) \$475.00	Payee address City; State; Zip Code P.O. Box 4486 Seattle, WA 98194				
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"/> Campaign Online Donation and Email Service		
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: 3/27 Report: 104/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/02/2012	5 Payee name Blue Utopia				
6 Amount (\$) \$618.66	7 Payee address City; State; Zip Code P.O. Box 4486 Seattle, WA 98194				
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"/> Cumulative donation processing fees for reporting period		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/06/2012	Payee name City of Austin				
Amount (\$) \$4.50	Payee address City; State; Zip Code 301 West 2nd Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> City Hall Parking Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/08/2012	Payee name City of Austin Utilities				
Amount (\$) \$634.87	Payee address City; State; Zip Code P.O. Box 2267 Austin, TX 78783				
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"/> Campaign Office Utilities		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/01/2012	Payee name Crook, Vanessa (Ms.)				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
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: 4/27 Report: 105/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/15/2012	5 Payee name Crook, Vanessa (Ms.)				
6 Amount (\$) \$1,200.00	7 Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 03/01/2012	Payee name Crook, Vanessa (Ms.)				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 03/15/2012	Payee name Crook, Vanessa (Ms.)				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 04/01/2012	Payee name Crook, Vanessa (Ms.)				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				

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

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/27 Report: 106/130	2 FILER NAME Shea, Brigid (Ms.)	3 ACCOUNT # (TEC filers) 00006000
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4 Date 03/04/2012	5 Payee name David Thomas Photography
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6 Amount (\$) \$150.00	7 Payee address City; State; Zip Code 2004-B E 9th St Austin, TX 78702
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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"/> Photo Shoot
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 02/03/2012	Payee name DeJesus, Frederico (Mr.)
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Amount (\$) \$275.00	Payee address City; State; Zip Code 7409 Arctic Ct. Austin, TX 78724
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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"/> Contract Labor - Furniture Moving
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/28/2012	Payee name Elsi's Restaurant
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Amount (\$) \$39.33	Payee address City; State; Zip Code 6601 Burnet Road Austin, TX 78748
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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"/> Campaign staff breakfast
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 02/03/2012	Payee name Elsi's Restaurant
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Amount (\$) \$36.66	Payee address City; State; Zip Code 6601 Burnet Road Austin, TX 78748
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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"/> Campaign staff lunch
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

Salaries/Wages/Contract Labor
Solicitation/Pundraising 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: 6/27 Report: 107/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/07/2012	5 Payee name Elsi's Restaurant				
6 Amount (\$) \$22.07	7 Payee address City: State: Zip Code 6601 Burnet Road Austin, TX 78748				
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"/> Campaign staff lunch		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/09/2012	Payee name Elsi's Restaurant				
Amount (\$) \$38.88	Payee address City: State: Zip Code 6601 Burnet Road Austin, TX 78748				
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"/> Lunch for workers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/11/2012	Payee name Elsi's Restaurant				
Amount (\$) \$90.78	Payee address City: State: Zip Code 6601 Burnet Road Austin, TX 78748				
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"/> Campaign staff lunch		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/29/2012	Payee name Elsi's Restaurant				
Amount (\$) \$25.81	Payee address City: State: Zip Code 6601 Burnet Road Austin, TX 78748				
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"/> Campaign staff dinner		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/27 Report: 108/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000
4 Date 03/02/2012	5 Payee name Elsi's Restaurant			
6 Amount (\$) \$119.02	7 Payee address City; State; Zip Code 6601 Burnet Road Austin, TX 78748			
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"/> Lunch for campaign volunteers	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 03/09/2012	Payee name Elsi's Restaurant			
Amount (\$) \$44.81	Payee address City; State; Zip Code 6601 Burnet Road Austin, TX 78748			
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"/> Lunch for campaign workers	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 02/25/2012	Payee name FedEx Office			
Amount (\$) \$11.14	Payee address City; State; Zip Code 6406 IH35 Austin, TX 78752			
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"/> Office Supplies - paper	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 03/20/2012	Payee name FedEx Office			
Amount (\$) \$79.57	Payee address City; State; Zip Code 327 Congress Ave Austin, TX 78701			
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"/> Flyer Printing	
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: 8/27 Report: 109/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/01/2012	5 Payee name Gage Furniture				
6 Amount (\$) \$2,500.00	7 Payee address City; State; Zip Code P.O. Box 5816 Austin, TX 78763				
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"/> Campaign Office Rent		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/01/2012	Payee name Gage Furniture				
Amount (\$) \$2,500.00	Payee address City; State; Zip Code P.O. Box 5816 Austin, TX 78763				
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"/> Campaign Office Rent		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/01/2012	Payee name Gage Furniture				
Amount (\$) \$2,500.00	Payee address City; State; Zip Code P.O. Box 5816 Austin, TX 78763				
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"/> Office Rent		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/09/2012	Payee name Garcia, Cosme (Mr.)				
Amount (\$) \$30.00	Payee address City; State; Zip Code 821 Gunter St Austin, TX 78702				
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"/> Contract labor for furniture moving/assembly		
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: 9/27 Report: 110/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/23/2012	5 Payee name Grande Communications				
6 Amount (\$) \$300.48	7 Payee address City; State; Zip Code 1923 E. 7th St STE 100 Austin, TX 78702				
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"/> Campaign Internet and Phone Services		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/11/2012	Payee name Grande Communications				
Amount (\$) \$180.03	Payee address City; State; Zip Code 1923 E. 7th St STE 100 Austin, TX 78702				
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"/> Capaign Phone and Internet Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/09/2012	Payee name Hatton, James (Mr.)				
Amount (\$) \$30.00	Payee address City; State; Zip Code 8400 Garcreek Circle Apt C Austin, TX 78724				
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"/> Contract labor for furniture moving/assembly		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/11/2012	Payee name HEB				
Amount (\$) \$11.18	Payee address City; State; Zip Code 5808 Burnet Rd Austin, TX 78756				
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"/> Office Supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/27 Report: 111/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/11/2012	5 Payee name HEB				
6 Amount (\$) \$8.63	7 Payee address City; State; Zip Code 5808 Burnet Rd Austin, TX 78756				
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"/> Office Supplies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/08/2012	Payee name Heilbron, Brently (Mr.)				
Amount (\$) \$600.00	Payee address City; State; Zip Code 8304 Kearsarge Austin, TX 78745				
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 Video Shoot		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/27/2012	Payee name Herrera, Fred (Mr.)				
Amount (\$) \$50.00	Payee address City; State; Zip Code 7815 Mullen Drive Austin, TX 78757				
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"/> Notary Public Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/06/2012	Payee name Hill-bert's Burgers				
Amount (\$) \$12.87	Payee address City; State; Zip Code 7211 Burnet Rd Austin, TX 78757				
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"/> Campaign lunch		
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 # **2** FILER NAME **3** ACCOUNT # (TEC filers)
Schedule: 11/27 Report: 112/130 Shea, Brigid (Ms.) 00006000

4 Date **5** Payee name
02/01/2012 Hughes, Matt (Mr.)

6 Amount (\$) **7** Payee address City; State; Zip Code
\$1,750.00 600 E. 53rd St Apt 243
Austin, TX 78751

8 **PURPOSE OF EXPENDITURE** **(a)** Category (See Categories listed at the top of this schedule) **(b)** Description (If travel outside of Texas, complete Schedule T) ☐
Salaries/Wages/Contract Labor Salary

9 Complete **ONLY** if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date Payee name
02/15/2012 Hughes, Matt (Mr.)

Amount (\$) Payee address City; State; Zip Code
\$1,750.00 600 E. 53rd St Apt 243
Austin, TX 78751

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Salaries/Wages/Contract Labor Salary

Complete **ONLY** if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date Payee name
03/01/2012 Hughes, Matt (Mr.)

Amount (\$) Payee address City; State; Zip Code
\$1,750.00 600 E. 53rd St Apt 243
Austin, TX 78751

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Office Overhead/Rental Expense Salary

Complete **ONLY** if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date Payee name
03/15/2012 Hughes, Matt (Mr.)

Amount (\$) Payee address City; State; Zip Code
\$1,750.00 600 E. 53rd St Apt 243
Austin, TX 78751

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Salaries/Wages/Contract Labor Salary

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: 12/27 Report: 113/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/01/2012	5 Payee name Hughes, Matt (Mr.)				
6 Amount (\$) \$1,750.00	7 Payee address City; State; Zip Code 600 E. 53rd St Apt 243 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"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/02/2012	Payee name IT Copy - IT Printing				
Amount (\$) \$324.75	Payee address City; State; Zip Code 512 W M.L.K. Blvd. Austin, TX 78701				
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"/> Flyer Printing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/23/2012	Payee name IT Copy - IT Printing				
Amount (\$) \$541.25	Payee address City; State; Zip Code 512 W M.L.K. Blvd. Austin, TX 78701				
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"/> Flyer Printing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/21/2012	Payee name Kitchen, Ann (Ms.)				
Amount (\$) \$100.00	Payee address City; State; Zip Code 2401 Briargrove Austin, TX 78704				
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"/> Donation Refund		
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: 13/27 Report: 114/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 03/30/2012	5 Payee name Lembas				
6 Amount (\$) \$12.00	7 Payee address City: State: Zip Code 6701 Burnet Rd Austin, TX 78757				
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"/> Snacks for volunteers		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/19/2012	Payee name Longhorn Trophies				
Amount (\$) \$13.53	Payee address City: State: Zip Code 4912 Burnet Rd Austin, TX 78756				
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"/> Office Supplies - plate		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/04/2012	Payee name Lowe's				
Amount (\$) \$19.27	Payee address City: State: Zip Code 8000 Shoal Creek Blvd. Austin, TX 78757				
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"/> Office keys		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/09/2012	Payee name Lowe's				
Amount (\$) \$35.13	Payee address City: State: Zip Code 8000 Shoal Creek Blvd. Austin, TX 78757				
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"/> Office Cleaning Supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/27 Report: 115/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
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4	Date 02/12/2012	5	Payee name Lowe's		
6	Amount (\$) \$8.76	7	Payee address City; State; Zip Code 8000 Shoal Creek Blvd. Austin, TX 78757		
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"/> Office keys	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

4	Date 02/24/2012	5	Payee name Lowe's		
	Amount (\$) \$62.36		Payee address City; State; Zip Code 8000 Shoal Creek Blvd. Austin, TX 78757		
	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"/> Office Supplies - cords, surge protectors	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

4	Date 02/01/2012	5	Payee name McNally, John (Mr.)		
	Amount (\$) \$1,600.00		Payee address City; State; Zip Code 3002 Breeze Terrace Austin, TX 78722		
	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"/> Salary	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

4	Date 02/15/2012	5	Payee name McNally, John (Mr.)		
	Amount (\$) \$1,600.00		Payee address City; State; Zip Code 3002 Breeze Terrace Austin, TX 78722		
	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"/> Salary	
	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: 15/27 Report: 116/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 03/01/2012	5 Payee name McNally, John (Mr.)				
6 Amount (\$) \$1,600.00	7 Payee address City: State: Zip Code 3002 Breeze Terrace Austin, TX 78722				
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"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/15/2012	Payee name McNally, John (Mr.)				
Amount (\$) \$1,600.00	Payee address City: State: Zip Code 3002 Breeze Terrace Austin, TX 78722				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/01/2012	Payee name McNally, John (Mr.)				
Amount (\$) \$1,600.00	Payee address City: State: Zip Code 3002 Breeze Terrace Austin, TX 78722				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/11/2012	Payee name McNally, Owen (Mr.)				
Amount (\$) \$50.00	Payee address City: State: Zip Code 3002 Breeze Ter #B Austin, TX 78722				
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"/> Sound Engineering Services for Campaign Office Open House		
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: 16/27 Report: 117/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 03/17/2012	5 Payee name North X Northwest				
6 Amount (\$) \$49.99	7 Payee address City; State; Zip Code 10010 Capt of Tex Hwy Austin, TX 78759				
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) <input type="checkbox"/> Beverages for Office Party		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/10/2012	Payee name Office Depot				
Amount (\$) \$29.44	Payee address City; State; Zip Code 816 Tirado Street Austin, TX 78752				
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"/> Office Supplies - badges, clipboards		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/01/2012	Payee name Office Max				
Amount (\$) \$98.30	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Color Copies, Office Supplies - folders		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/01/2012	Payee name Office Max				
Amount (\$) \$61.28	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Supplies - badges, binders, clipboards		
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: 17/27 Report: 118/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/12/2012	5 Payee name Office Max				
6 Amount (\$) \$18.94	7 Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Copies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/18/2012	Payee name Office Max				
Amount (\$) \$27.90	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Supplies - badges		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/21/2012	Payee name Office Max				
Amount (\$) \$13.31	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Supplies - mailing labels		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/21/2012	Payee name Office Max				
Amount (\$) \$29.22	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Supplies - mailing labels		
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: 18/27 Report: 119/130 2 FILER NAME Shea, Brigid (Ms.) 3 ACCOUNT # (TEC filers) 00006000

4 Date 02/22/2012 5 Payee name Office Max

6 Amount (\$) \$24.24 7 Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756

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) ☐ Copies

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date 02/25/2012 Payee name Office Max

Amount (\$) \$7.37 Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756

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) ☐ Copies

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date 02/26/2012 Payee name Office Max

Amount (\$) \$13.84 Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Description (If travel outside of Texas, complete Schedule T) ☐ Office Supplies - tape, desk pad

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date 02/28/2012 Payee name Office Max

Amount (\$) \$8.63 Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756

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) ☐ Copies

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: 19/27 Report: 120/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 03/05/2012	5 Payee name Office Max				
6 Amount (\$) \$75.75	7 Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Equipment		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/06/2012	Payee name Office Max				
Amount (\$) \$80.93	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Supplies - printer ink, paper		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/08/2012	Payee name Office Max				
Amount (\$) \$8.12	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Copies, fax service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/08/2012	Payee name Office Max				
Amount (\$) \$186.69	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Supplies - printer Ink, paper		
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/Memorials 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: 20/27 Report: 121/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 03/13/2012	5 Payee name Office Max				
6 Amount (\$) \$26.52	7 Payee address City: State; Zip Code 907 West Fifth Street Austin, TX 78703				
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"/> Copies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/19/2012	Payee name Office Max				
Amount (\$) \$148.78	Payee address City: State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Office Supplies - printer ink, paper		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/20/2012	Payee name Office Max				
Amount (\$) \$19.49	Payee address City: State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Flyer Printing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/23/2012	Payee name Office Max				
Amount (\$) \$108.44	Payee address City: State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Copies		
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: 21/27 Report: 122/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/11/2012	5 Payee name Oliver, Bill (Mr.)				
6 Amount (\$) \$50.00	7 Payee address City; State; Zip Code 2728 S Congress #12 Austin, TX 78704				
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) <input type="checkbox"/> Musician Services for Campaign Office Open House		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/17/2012	Payee name Oliver, Bill (Mr.)				
Amount (\$) \$200.00	Payee address City; State; Zip Code 2728 S Congress #12 Austin, TX 78704				
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"/> Musician Services for Office Party		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/27/2012	Payee name Papa Johns				
Amount (\$) \$26.81	Payee address City; State; Zip Code 5343 Burnet Rd Austin, TX 78756				
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"/> Dinner for campaign workers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/06/2012	Payee name Postal, etc.				
Amount (\$) \$8.88	Payee address City; State; Zip Code 5350 Burnet Rd Ste 8 Austin, TX 78756				
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"/> Copies		
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: 22/27 Report: 123/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/10/2012	5 Payee name Postal, etc.				
6 Amount (\$) \$30.04	7 Payee address City; State; Zip Code 5350 Burnet Rd Ste 8 Austin, TX 78756				
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"/> Copies		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/09/2012	Payee name Saucedo, Jorge (Mr.)				
Amount (\$) \$30.00	Payee address City; State; Zip Code 2905 Cherry Ln Austin, TX 78617				
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"/> Contract Labor for furniture moving/assembly		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/27/2012	Payee name Shoehorn Design				
Amount (\$) \$541.25	Payee address City; State; Zip Code 1010 E. 11th St Austin, TX 78702				
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"/> Logo Design		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/05/2012	Payee name South Austin Democrats				
Amount (\$) \$11.00	Payee address City; State; Zip Code P.O. Box 152592 Austin, TX 78715				
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"/> Membership Dues		
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: 23/27 Report: 124/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 03/12/2012	5 Payee name South Austin Democrats				
6 Amount (\$) \$50.00	7 Payee address City; State; Zip Code P.O. Box 152592 Austin, TX 78715				
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"/> Membership List		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/02/2012	Payee name Square				
Amount (\$) \$164.71	Payee address City; State; Zip Code 110 5th Street San Francisco, CA 94103				
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"/> Cumulative credit card processing fees for reporting period - reader #2		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/02/2012	Payee name Square				
Amount (\$) \$381.85	Payee address City; State; Zip Code 110 5th Street San Francisco, CA 94103				
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"/> Cumulative credit card processing fees for reporting period - reader #1		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/22/2012	Payee name Texas Democratic Party				
Amount (\$) \$100.00	Payee address City; State; Zip Code 505 West 12th Street Suite 200 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Donation		
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: 24/27 Report: 125/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 01/30/2012	5 Payee name Threadgill's World Headquarters				
6 Amount (\$) \$300.00	7 Payee address City: State: Zip Code 301 West Riverside Dr. Austin, TX 78704				
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) <input type="checkbox"/> Campaign Launch Party - Deposit		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/01/2012	Payee name Threadgill's World Headquarters				
Amount (\$) \$136.72	Payee address City: State: Zip Code 301 West Riverside Dr. 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"/> Campaign staff dinner		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/03/2012	Payee name Threadgill's World Headquarters				
Amount (\$) \$170.60	Payee address City: State: Zip Code 301 West Riverside Dr. Austin, TX 78704				
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"/> Campaign Launch Party		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/17/2012	Payee name T-Mobile				
Amount (\$) \$87.59	Payee address City: State: Zip Code 4700 W Guadalupe STE 1 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"/> Phones		
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: 25/27 Report: 126/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 03/18/2012	5 Payee name T-Mobile				
6 Amount (\$) \$55.13	7 Payee address City: State; Zip Code 4700 W Guadalupe STE 1 Austin, TX 78751				
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"/> Phone service		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/06/2012	Payee name Tops - South				
Amount (\$) \$50.00	Payee address City: State; Zip Code 1300 E 5th St Austin, TX 78702				
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"/> Campaign office furniture		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/08/2012	Payee name Tops - South				
Amount (\$) \$12.99	Payee address City: State; Zip Code 1300 E 5th St Austin, TX 78702				
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"/> Office Supplies - cables		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/28/2012	Payee name Unicom Wireless				
Amount (\$) \$135.27	Payee address City: State; Zip Code 5905 Burnet Rd Austin, TX 78754				
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"/> Phones		
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: 26/27 Report: 127/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/21/2012	5 Payee name United States Postal Service Northcross Station				
6 Amount (\$) \$90.00	7 Payee address City; State; Zip Code 7700 Northcross Dr Austin, TX 78757				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/07/2012	Payee name United States Postal Service Northcross Station				
Amount (\$) \$39.68	Payee address City; State; Zip Code 7700 Northcross Dr Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/07/2012	Payee name United States Postal Service Northcross Station				
Amount (\$) \$90.00	Payee address City; State; Zip Code 7700 Northcross Dr Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/01/2012	Payee name Worley Printing Co., Inc.				
Amount (\$) \$101.76	Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722				
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"/> Printing - posters, stickers		
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: 27/27 Report: 128/130		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 02/20/2012	5 Payee name Worley Printing Co., Inc.				
6 Amount (\$) \$606.20	7 Payee address City: State: Zip Code 3217 North IH 35 Austin, TX 78722				
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"/> Printing - posters, stickers, banner		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/02/2012	Payee name Worley Printing Co., Inc.				
Amount (\$) \$94.18	Payee address City: State: Zip Code 3217 North IH 35 Austin, TX 78722				
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"/> Printing - stickers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/24/2012	Payee name Worley Printing Co., Inc.				
Amount (\$) \$5,043.37	Payee address City: State: Zip Code 3217 North IH 35 Austin, TX 78722				
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"/> Yard signs, remit envelopes, doorhangers, business cards, letterhead/envelopes, label stickers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/07/2012	Payee name yousendit				
Amount (\$) \$9.99	Payee address City: State: Zip Code 1919 S Bascom Ave 3rd Floor Campbell, CA 95008				
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"/> File Sharing Subscription Service		
Complete ONLY if direct expenditure to benefit C/OH	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.

1 PAGE # **2** FILER NAME **3** ACCOUNT # (TEC filers)
Schedule: 1/1 Report: 129/130 Shea, Brigid (Ms.) 00006000

4 Date **5** Payee name
01/22/2012 Elsi's Restaurant

6 Amount (\$) **7** Payee address City; State; Zip Code
\$38.01 6601 Burnet Road
Austin, TX 78748
☐ Reimbursement from political contributions intended

8 **PURPOSE OF EXPENDITURE** **(a)** Category (See Categories listed at the top of this schedule) **(b)** Description (If travel outside of Texas, complete Schedule T) ☐
Food/Beverage Expense Campaign staff breakfast

Date Payee name
01/24/2012 Elsi's Restaurant

Amount (\$) Payee address City; State; Zip Code
\$16.39 6601 Burnet Road
Austin, TX 78748
☐ Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Food/Beverage Expense Campaign staff breakfast

Date Payee name
01/02/2012 Walton's Fancy and Staple

Amount (\$) Payee address City; State; Zip Code
\$86.33 609 W. 6th Street
Austin, TX 78701
☐ Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Food/Beverage Expense Lunch for volunteers

**INTEREST EARNED, OTHER CREDITS/GAINS/
REFUNDS, AND PURCHASE OF INVESTMENTS****SCHEDULE K**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #
Schedule: 1/1 Report: 130/130**2** FILER NAME Shea, Brigid (Ms.)**3** ACCOUNT # (Ethics Commission filers)
00006000

4 Date 02/06/2012	5 Name of person from whom amount is received JPMorgan Chase Bank, N.A. 6 Address of person from whom amount is received; City; State; Zip Code 7600 Burnet Road Austin, TX 78757 7 Purpose for which amount is received Interest on Checking Account	8 Amount (\$) \$0.03
---------------------------------	--	---------------------------------------

Date 03/06/2012	Name of person from whom amount is received JPMorgan Chase Bank, N.A. Address of person from whom amount is received; City; State; Zip Code 7600 Burnet Road Austin, TX 78757 Purpose for which amount is received Interest on Checking Account	Amount (\$) \$0.04
------------------------	---	------------------------------

Date 02/27/2012	Name of person from whom amount is received Paypal Address of person from whom amount is received; City; State; Zip Code 2145 Hamilton Avenue San Jose, CA 95125 Purpose for which amount is received Credit to verify bank account	Amount (\$) \$0.27
------------------------	---	------------------------------

SCHEDULE V - attach to form C/OH (C & E)
Reference 2-2-22, Austin City Code

PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF

Name of Candidate/Officeholder: Brigid Shea

Enter the name and address of any person who has solicited and obtained contributions on your behalf during the reporting period of \$200 per person from five or more individuals. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

<i>Name of person soliciting contributions</i>	<i>Address</i>
Diane Hyatt *	400 N Lowell Ln, Austin, TX 78733
	(fundraising event at this residence)

Reminder: This form is to identify bundlers, i.e. individuals who solicit and obtain contributions on your behalf. Remember there is a separate form to identify the *actual* donors (C/OH).

All Contributions shown on C/OH from "bundlers" are marked with asterisks as shown above in their respective employer/occupation information.

AUSTIN CITY CLERK
RECEIVED

2012 MAY 4 PM 4 48

DISCLOSURE OF LOANS AND EXPENDITURES FROM PERSONAL FUNDS OF A
CANDIDATE OR OFFICEHOLDER

This report is for candidates or officeholders who loan personal funds to his/her campaign or make expenditures from personal funds in support of his or her campaign. The amounts loaned or expended shall be reported as follows.

Beginning on the date an individual becomes a candidate in a city election and continuing until midnight on the tenth day before a city election, a candidate shall report the new loans or expenditures cumulating to \$25,000 or more within seven business days. Additional loans or expenditures must be reported within seven business days each time they cumulate to \$25,000 or more. [2-2-27(A)(1)]

If the expenditures cumulating to \$25,000 or more occur during the period beginning on midnight on the 10th day before an election and ending at midnight on the day before the election, the report shall be filed within twenty-four hours with the City Clerk. [2-2-27(A)(2)]

Name of Candidate/Officeholder: Brigid Shea

Reporting Period:

- ☒ First day of candidacy – Midnight on the 10th day prior to city election
- ☐ Midnight on the 10th day before city election – Midnight on the day before election

Enter the following information concerning loans of personal funds to the campaign:

Amount of loan	Date of loan
40,000.00	5-2-2012

SCHEDULE Y
Reference 2-2-27, Austin City Code

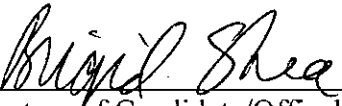
Enter the following information concerning the person or persons to whom expenditures were made from personal funds and the total amount, purpose and date of each expenditure:

Name	Street Address	Amount	Purpose	Date

STATE OF TEXAS

VERIFICATION

I swear that the preceding disclosure of loans and expenditures from personal funds of a candidate or officeholder, filed herewith is in all things true and correct, and fully shows all information required to be reported by me pursuant to Section 2-2-32 City Code for the reporting period indicated.



Signature of Candidate/Officeholder

VERIFICATION FOR ELECTRONIC FILING

AFFIDAVIT

I, Brigid Shea, swear or affirm, that the accompanying report filed on electronic disk is true and correct and includes all information required to be reported by me under Title 15, Election Code.

5-2-2012

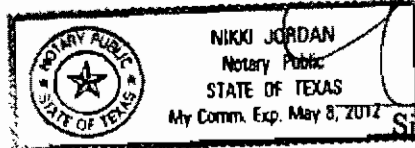
Date

Brigid Shea

Signature - Candidate or Officeholder

Sworn to and subscribed before me, by the said Brigid Shea, this the 4th day of May, 2012, to certify which, witness my hand and seal.

SEAL



[Signature]
Signature - officer administering oath

2012 MAY 4 PM 4 48
RECEIVED
AUSTIN CITY CLERK

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) 00006000	2 PAGE # 1 of 72
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Brigid		OFFICE USE ONLY Date Received 2012 MAY 4 PM 4:40 AUSTIN CITY CLERK RECEIVED Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Shea		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2604 Geraghty Ave. Austin, TX 78757		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Danette		
	NICKNAME LAST SUFFIX Chimenti		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 200 The Circle Austin, TX 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 912-8290		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 04/03/2012 THROUGH 05/02/2012		
10 ELECTION	ELECTION DATE Month Day Year 05/12/2012		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Mayor

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Shea, Brigid (Ms.)

14 ACCOUNT # (Ethics Commission filers)
0000600015 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
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

178.00

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

\$

30,853.90

EXPENDITURE
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

39,744.90

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

\$

84,550.76

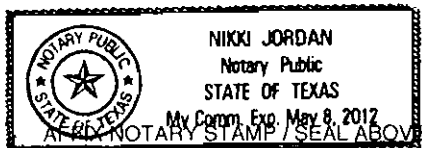
OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

65,000.00

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.



Brigid Shea
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Brigid Shea, this the 4th day of May, 2012, to certify which, witness my hand and seal of office.

Nikki Jordan
Signature of officer administering oath

Nikki Jordan
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: 1/56 Report: 3/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filters)
00006000

4 Date 05/02/2012 5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Allbright, Erika (Ms.)

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

\$20.00

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

6 Contributor address; City; State; Zip Code
3309 Merrie Lynn
Austin, TX 78722

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 04/14/2012 Full name of contributor ☐ out-of-state PAC (ID# _____)
Alsup, Marion (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$50.00

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

Contributor address; City; State; Zip Code
2311 Pruett
Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/01/2012 Full name of contributor ☐ out-of-state PAC (ID# _____)
Alsup, Marion (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$50.00

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

Contributor address; City; State; Zip Code
2311 Pruett
Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/02/2012 Full name of contributor ☐ out-of-state PAC (ID# _____)
Alsup, Mitch (Mr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$100.00

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

Contributor address; City; State; Zip Code
2311 Pruett
Austin, TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/04/2012 Full name of contributor ☐ out-of-state PAC (ID# _____)
Anderson, Barbara (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

\$50.00

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

Contributor address; City; State; Zip Code
8451 Antero Dr
Austin, TX 78759

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: 2/56 Report: 4/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Leslie (Ms.) 6 Contributor address; City; State; Zip Code 10233 Snapdragon Dr Austin, TX 78739	7 Amount of contribution (\$) \$175.00	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 04/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arbuckle, Michael (Mr.) Contributor address; City; State; Zip Code 1811 Burbank St. Austin, TX 78757	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) Director		Employer (See Instructions) Pilates Center of Austin	
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aroian, Karen (Ms.) Contributor address; City; State; Zip Code 3005 McElroy 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)		Employer (See Instructions)	
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Atherton, Leeann (Ms.) Contributor address; City; State; Zip Code 3600 S. 2nd 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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Avila, Lydia (Ms.) Contributor address; City; State; Zip Code 1221 Algarita Ave #159 Austin, TX 78704	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 3/56 Report: 5/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Brooke (Ms.) 6 Contributor address; City; State; Zip Code 1801 West 10th St Austin, TX 78703	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 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baker, Mary Farr Jordan (Ms.) Contributor address; City; State; Zip Code 2301 Windsor Rd Austin, TX 78703	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 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, Elizabeth (Ms.) Contributor address; City; State; Zip Code 2730 Tether Tr Austin, TX 78704	Amount of contribution (\$) \$40.00	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 04/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barrett, Kathy (Ms.) Contributor address; City; State; Zip Code 9011 Blue Quail Austin, TX 78758	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 04/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barrett, Michael (Mr.) Contributor address; City; State; Zip Code 5104 Beverly Skyline 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) Professor		Employer (See Instructions) UT Austin		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/56 Report: 6/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Beck, Marita (Ms.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

04/04/2012

6 Contributor address; City; State; Zip Code
2700 Pegram Ave
Austin, TX 78757

\$40.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Beers, Stephen (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code
3201 Darnell
Austin, TX 78745

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Berk, Susan (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/12/2012

Contributor address; City; State; Zip Code
2013 Emma Long St
Austin, TX 78723

\$30.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Better Austin Today PAC

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/11/2012

Contributor address; City; State; Zip Code
3203 Cupid Dr
Austin, TX 78735

\$350.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code
4414 Three Creek Trail
Spicewood, TX 78669

\$50.00

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

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: 5/56 Report: 7/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackhurst, Michael (Mr.) 6 Contributor address; City; State; Zip Code 1504 Canterbury St Austin, TX 78702		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 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bonds, Tara (Ms.) Contributor address; City; State; Zip Code 1007 West Mary St Austin, TX 78704		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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Borden, Ann (Ms.) Contributor address; City; State; Zip Code 24815 Hamilton Pool Rd Round Mountain, TX 78663		Amount of contribution (\$) \$40.00	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 04/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bornstein, Sue (Ms.) Contributor address; City; State; Zip Code 909 Post Oak Austin, TX 78704		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) Physician			Employer (See Instructions) Texas Medical Home Initiative	
Date 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bowman, Andrew (Mr.) Contributor address; City; State; Zip Code 212 West 33rd St 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) Energy Development			Employer (See Instructions) Pioneer Green Energy, LLC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 6/56 Report: 8/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bowman, Andrew (Mr.) 6 Contributor address; City; State; Zip Code 212 West 33rd St Austin, TX 78705		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) Energy Development			10 Employer (See Instructions) Pioneer Green Energy, LLC	
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brodnax, Pal (Ms.) Contributor address; City; State; Zip Code 1105 West Annie 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)			Employer (See Instructions)	
Date 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Beth (Ms.) Contributor address; City; State; Zip Code 6300 Wallace Cove 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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Suzee (Ms.) Contributor address; City; State; Zip Code 4900 Avenue H 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)			Employer (See Instructions)	
Date 04/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Browning, Gayle (Ms.) Contributor address; City; State; Zip Code 2620 Berkett Dr Austin, TX 78745		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) Business Analyst			Employer (See Instructions) Texas Health and Human Services Commission	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/56 Report: 9/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filters)

00006000

4 Date

05/01/2012

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

Burr, Lisa (Ms.)

6 Contributor address; City; State; Zip Code
609 Westbrook Dr.
Austin, TX 78746

7 Amount of
contribution (\$)

\$125.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/01/2012

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

Burr, Mark (Mr.)

Contributor address; City; State; Zip Code
609 Westbrook Dr.
Austin, TX 78746

Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

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

Burton, Scott (Mr.)

Contributor address; City; State; Zip Code
4509 Sinclair Ave
Austin, TX 78756

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/21/2012

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

Butler, Chris (Mr.)

Contributor address; City; State; Zip Code
4105 Ramsey Ave
Austin, TX 78756

Amount of
contribution (\$)

\$5.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

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

Campbell, Lynn (Ms.)

Contributor address; City; State; Zip Code
609 A West Annie St
Austin, TX 78704

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

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: 8/56 Report: 10/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carbone, K.F. (Ms.) 6 Contributor address; City; State; Zip Code 2710 West 49th 1/2 St Austin, TX 78731	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 04/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Century, Ted (Mr.) Contributor address; City; State; Zip Code 7327 Bryan St Philadelphia, PA 19119	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) Inventor		Employer (See Instructions) Penn-Century Inc		
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cespedes, Carol (Ms.) Contributor address; City; State; Zip Code 7300 Callbraam Ln Austin, TX 78736	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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chiarello, Stephanie (Ms.) Contributor address; City; State; Zip Code 4600 Mueller Blvd #3126 Austin, TX 78723	Amount of contribution (\$) \$15.00	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ciccavelli, Shannon (Ms.) Contributor address; City; State; Zip Code 1807 Treadwell Austin, TX 78704	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: 9/56 Report: 11/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/21/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Ann (Ms.) 6 Contributor address; City; State; Zip Code 906 Red Bud Trail Austin, TX 78746	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) Kitchen Design Consultant		10 Employer (See Instructions) Self	
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Pamela (Ms.) Contributor address; City; State; Zip Code 4100 Bluffridge Dr Austin, TX 78759	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 04/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clarke, Margot (Ms.) Contributor address; City; State; Zip Code 5106 Evergreen Ct. Austin, TX 78731	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coldiron, Ron (Mr.) Contributor address; City; State; Zip Code 6509 Marblewood Austin, TX 78731	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Collins, Stefanie (Ms.) Contributor address; City; State; Zip Code 2311 Riverside Farms Austin, TX 78741	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 10/56 Report: 12/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Cooper, Lanetta (Ms.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

04/07/2012

6 Contributor address; City; State; Zip Code

5008 Eilers Ave.
Austin, TX 78751

\$50.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Cooper, Lanetta (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/25/2012

Contributor address; City; State; Zip Code

5008 Eilers Ave.
Austin, TX 78751

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Cowden, Christine (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/21/2012

Contributor address; City; State; Zip Code

1604 Leigh St
Austin, TX 78703

\$175.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Cowden, James (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/21/2012

Contributor address; City; State; Zip Code

1604 Leigh St
Austin, TX 78703

\$175.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Craig, Ken (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/09/2012

Contributor address; City; State; Zip Code

913-B Sirocco Dr
Austin, TX 78745

\$50.00

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

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: 11/56 Report: 13/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

05/01/2012

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

Craig, Ken (Mr.)

6 Contributor address; City; State; Zip Code

913-B Sirocco Dr
Austin, TX 78745

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/27/2012

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

Crow, Dan (Mr.)

Contributor address; City; State; Zip Code

2803 Down Cove
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

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

Dabbs, Robert (Mr.)

Contributor address; City; State; Zip Code

10233 Snapdragon Dr
Austin, TX 78739

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/20/2012

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

Davis, Marshall (Mr.)

Contributor address; City; State; Zip Code

P.O. Box 3048
Austin, TX 78764

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

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

De La Fuente, Flavia (Ms.)

Contributor address; City; State; Zip Code

3001 Cherrywood
Austin, TX 78722

Amount of
contribution (\$)

\$3.00

In-kind contribution
description (if applicable)

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

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: 12/56 Report: 14/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DiLeo, Tracy (Ms.) 6 Contributor address; City; State; Zip Code 9 Niles Rd 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) Executive		10 Employer (See Instructions) Killam Co	
Date 04/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dittmar, Christina (Ms.) Contributor address; City; State; Zip Code 904 Ebony 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)		Employer (See Instructions)	
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Divine, Deda (Ms.) Contributor address; City; State; Zip Code P.O. Box 1724 Blanco, TX 78606	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dixon, Christine (Ms.) Contributor address; City; State; Zip Code 1411 Brentwood St Austin, TX 78757	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 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dolis, George (Mr.) Contributor address; City; State; Zip Code 704 W Gibson St. Austin, TX 78704	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) 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: 13/56 Report: 15/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Donovan, Brian (Mr.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

05/02/2012

6 Contributor address: City; State; Zip Code
508 Genard St
Austin, TX 78751

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Doze, Danny (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/01/2012

Contributor address: City; State; Zip Code
2210 Enfield Rd #10
Austin, TX 78703

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Drapen, Gigi (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2012

Contributor address: City; State; Zip Code
2414 Elmglen Dr
Austin, TX 78704

\$10.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dubay, Debrah (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/21/2012

Contributor address: City; State; Zip Code
10301 Ranch Road 2222 #2122
Austin, TX 78730

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dubay, Debrah (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2012

Contributor address: City; State; Zip Code
10301 Ranch Road 2222 #2122
Austin, TX 78730

\$100.00

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

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: 14/56 Report: 16/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dubose, Louis (Mr.) 6 Contributor address; City; State; Zip Code 2312 Pruett St 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)		10 Employer (See Instructions)	
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dulzaides, Beatriz (Ms.) Contributor address; City; State; Zip Code 902 B Ramble Ln Austin, TX 78745	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) Regional Services Manager		Employer (See Instructions) Roche	
Date 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dunlap, Bridget Marie (Ms.) Contributor address; City; State; Zip Code 1503 Betty Jo Dr Austin, TX 78704	Amount of contribution (\$) \$175.00	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Echols, Catharine (Ms.) Contributor address; City; State; Zip Code 508 Harris Ave 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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eichberg, Adam (Mr.) Contributor address; City; State; Zip Code 1122 Gaylord St Denver, CO 80206	Amount of contribution (\$) \$175.00	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: 15/56 Report: 17/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eichberg, Jennifer (Ms.) 6 Contributor address; City; State; Zip Code 1122 Gaylord St Denver, CO 80206	7 Amount of contribution (\$) \$175.00	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 04/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellis, Andy (Mr.) Contributor address; City; State; Zip Code 10300 Jollyville Rd #720 Austin, TX 78759	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 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eubanks, Forrestt (Mr.) Contributor address; City; State; Zip Code 508 Treys Way Austin, TX 78745	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) Carpenter		Employer (See Instructions) Self		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ewell, Joan (Ms.) Contributor address; City; State; Zip Code 1700 Madison Ave 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)		Employer (See Instructions)		
Date 04/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Falls, Beth (Ms.) Contributor address; City; State; Zip Code 5831 Secrest Dr Austin, TX 78759	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: 16/56 Report: 18/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Fantl, Nina (Ms.)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

04/18/2012

6 Contributor address; City; State; Zip Code

601 S. 3rd St
Austin, TX 78704

\$80.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Faust, Eric (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/19/2012

Contributor address; City; State; Zip Code

823 E 53rd St
Austin, TX 78751

\$350.00

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

Principal occupation / Job title (See Instructions)
Executive Director

Employer (See Instructions)
J/24 Class Association

Date

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

Feinberg, Paula (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/05/2012

Contributor address; City; State; Zip Code

6005 Balcones
El Paso, TX 79912

\$150.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Fisher, Cindy (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/14/2012

Contributor address; City; State; Zip Code

1812 Vallejo St
Austin, TX 78757

\$150.00

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

Principal occupation / Job title (See Instructions)
Software Engineer

Employer (See Instructions)
Emerson

Date

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

Fisher, Cindy (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code

1812 Vallejo St
Austin, TX 78757

\$60.00

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

Principal occupation / Job title (See Instructions)
Software Engineer

Employer (See Instructions)
Emerson

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 17/56 Report: 19/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

05/02/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ford, Charlie (Mr.)

6 Contributor address; City; State; Zip Code
625 Bentwood St
Austin, TX 78752

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)

10 Employer (See Instructions)

Date

04/24/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ford, Scott (Mr.)

Contributor address; City; State; Zip Code
2602 Cavileer Ave
Austin, TX 78757

Amount of contribution (\$)

\$75.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/21/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Francois, Nine (Ms.)

Contributor address; City; State; Zip Code
3301 Govalle Ave.
Austin, TX 78702

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/19/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Frazier, Jeff (Mr.)

Contributor address; City; State; Zip Code
1510 Newton
Austin, TX 78704

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/08/2012

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

Contributor address; City; State; Zip Code
5732 Gorham Glen Ln
Austin, TX 78739

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

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: 18/56 Report: 20/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gage, Leslie (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box 5816 Austin, TX 78763	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) Retired		10 Employer (See Instructions) N/A	
Date 04/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, Regan (Ms.) Contributor address; City; State; Zip Code 3125 Hemphill Pk 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)		Employer (See Instructions)	
Date 04/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, William (Mr.) Contributor address; City; State; Zip Code 3125 Hemphill Pk 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)		Employer (See Instructions)	
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geiger, Carol (Ms.) Contributor address; City; State; Zip Code 2613 Nottingham Ln 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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geismar-Bowman, Anna (Ms.) Contributor address; City; State; Zip Code 2308 Canterbury 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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 19/56 Report: 21/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

04/21/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
George, Mary (Ms.)

6 Contributor address; City; State; Zip Code
4314 Ave G
Austin, TX 78751

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
German, Light (Ms.)

05/01/2012

Contributor address; City; State; Zip Code
3803 Willowbrook Dr.
Austin, TX 78722

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gibbons, Heidi (Ms.)

04/14/2012

Contributor address; City; State; Zip Code
613 Hearn St
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gibbons, Heidi (Ms.)

05/01/2012

Contributor address; City; State; Zip Code
613 Hearn St
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gillis, Julie (Ms.)

05/01/2012

Contributor address; City; State; Zip Code
1425 Cloverleaf Dr.
Austin, TX 78723

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

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: 20/56 Report: 22/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

04/15/2012

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

Glass, Pam (Ms.)

6 Contributor address; City; State; Zip Code
1701 Pheasant Roost
Austin, TX 78758

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/29/2012

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

Gordon, William (Mr.)

Contributor address; City; State; Zip Code
6103 Cary Dr
Austin, TX 78757

Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

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

Gray, Kenneth (Mr.)

Contributor address; City; State; Zip Code
2405 Forest Avenue
Austin, TX 78704

Amount of
contribution (\$)

\$30.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

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

Gray, Meredith (Ms.)

Contributor address; City; State; Zip Code
700 Zennia St
Austin, TX 78751

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/01/2012

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

Grover, Rhonda (Ms.)

Contributor address; City; State; Zip Code
2607 Pinewood Terrace
Austin, TX 78757

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

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: 21/56 Report: 23/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Guerrero, Linda (Ms.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

04/04/2012

6 Contributor address; City; State; Zip Code

3204 Fairfax Walk
Austin, TX 78705

\$65.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Guerrero, Linda (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/07/2012

Contributor address; City; State; Zip Code

3204 Fairfax Walk
Austin, TX 78705

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Guerrero, Linda (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/01/2012

Contributor address; City; State; Zip Code

3204 Fairfax Walk
Austin, TX 78705

\$35.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Hall, Whitney (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code

1603 Taylor Gaines
Austin, TX 78741

\$10.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Hansen, Ingrid (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/14/2012

Contributor address; City; State; Zip Code

1510 Garner Ave
Austin, TX 78704

\$50.00

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

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: 22/56 Report: 24/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Hanson Correa, Kathy (Ms.)

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

04/05/2012

6 Contributor address; City; State; Zip Code
7809 Gault St
Austin, TX 78757

\$25.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Hardin, Kathy (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

04/13/2012

Contributor address; City; State; Zip Code
9501 Rolling Oaks Tr
Austin, TX 78750

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Harkey, Beverley (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code
2601 Albata Ave
Austin, TX 78757

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Harris, Gayla (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

04/24/2012

Contributor address; City; State; Zip Code
411 B West Johanna St
Austin, TX 78704

\$75.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Hauwert, Nico (Mr.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

04/18/2012

Contributor address; City; State; Zip Code
2401 Bahama
Austin, TX 78733

\$50.00

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

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: 23/56 Report: 25/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Hendrikz, Earl (Mr.)

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

05/02/2012

6 Contributor address; City; State; Zip Code

5904 Mountain
Austin, TX 78731

\$10.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Henson, Scott (Mr.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code

1403 Ulit Ave
Austin, TX 78702

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Hetrick, Kathleen (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/01/2012

Contributor address; City; State; Zip Code

4406 B Bennett Ave
Austin, TX 78751

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Hetrick, Kathleen (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code

4406 B Bennett Ave
Austin, TX 78751

\$30.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Hilscher, Janice (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code

902 Gamer Ave
Austin, TX 78704

\$25.00

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

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: 24/56 Report: 26/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hinze, Kathy (Ms.) 6 Contributor address; City; State; Zip Code 11406 Boulder Ln Austin, TX 78726		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)			10 Employer (See Instructions)	
Date 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holland, Jim (Mr.) Contributor address; City; State; Zip Code 110 West Elizabeth St Austin, TX 78704		Amount of contribution (\$) \$40.00	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holland, Simon (Mr.) Contributor address; City; State; Zip Code 10044 Circleview Dr Austin, TX 78733		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) Real Estate Investor			Employer (See Instructions) Self	
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holm, Reid (Mr.) Contributor address; City; State; Zip Code 9101 La Cresada Dr #2036 Austin, TX 78749		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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horne, K. Angel (Ms.) Contributor address; City; State; Zip Code P.O. Box 684954 Austin, TX 78768		Amount of contribution (\$) \$15.00	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: 25/56 Report: 27/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howell, Marie (Ms.) 6 Contributor address; City; State; Zip Code 4521 Heritage Well Ln Round Rock, TX 78665	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) Paralegal		10 Employer (See Instructions) Nassour Law Firm	
Date 04/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hunt, Amy (Ms.) Contributor address; City; State; Zip Code 2408 Bluffview Dr. Austin, TX 78704	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 04/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hutchison, Janet (Ms.) Contributor address; City; State; Zip Code 2602 Cavileer Ave Austin, TX 78757	Amount of contribution (\$) \$75.00	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Issa, Michel (Mr.) Contributor address; City; State; Zip Code 4017 Greystone 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/Manager		Employer (See Instructions) University Realty	
Date 04/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jackman, Merl (Mr.) Contributor address; City; State; Zip Code 1000 West 39th St Austin, TX 78756	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) Optometrist		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/56 Report: 28/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jenkins, Sharon (Ms.) 6 Contributor address; City; State; Zip Code 3211 Larry Ln Austin, TX 78722	7 Amount of contribution (\$) \$10.00	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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jepson, Craig (Mr.) Contributor address; City; State; Zip Code 555 E 5th St 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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, George (Mr.) Contributor address; City; State; Zip Code 6102 Mountainclimb Dr Austin, TX 78731	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 04/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Juday, Jennifer (Ms.) Contributor address; City; State; Zip Code 4209 Dauphine Dr Austin, TX 78727	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) HR Manager		Employer (See Instructions) Baxter Health Care	
Date 04/18/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kallerman, Dick (Mr.) Contributor address; City; State; Zip Code 2510 Cedarview Dr 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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 27/56 Report: 29/72	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kallerman, Dick (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 2510 Cedarview 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) Housewife		10 Employer (See Instructions) N/A			
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kambe, Torge (Ms.) <hr/> Contributor address; City; State; Zip Code 10044 Circleview Dr Austin, TX 78733	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) Housewife		Employer (See Instructions) N/A			
Date 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kapner, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code 4303 Wildridge Cir Austin, TX 78759	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 04/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keller, Eileen (Ms.) <hr/> Contributor address; City; State; Zip Code 3905 Ridgelea Dr Austin, TX 78731	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 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly, Sean (Mr.) <hr/> Contributor address; City; State; Zip Code 910 Post Oak Austin, TX 78704	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) Geologist		Employer (See Instructions) TCEQ			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 28/56 Report: 30/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Kemp, Shannon (Ms.)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

04/28/2012

6 Contributor address; City; State; Zip Code
2113 A Montclair St
Austin, TX 78704

\$50.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Kerr, Kathleen (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code
1503 Wildcat Hollow
Austin, TX 78746

\$200.00

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

Principal occupation / Job title (See Instructions)
Environmental Engineering and Consulting

Employer (See Instructions)
RPS

Date

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

Khan, Sophia (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code
6905 Crosby Circle #31
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)
Housewife

Employer (See Instructions)
N/A

Date

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

Khan, Tahseen (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code
6905 Crosby Circle #31
Austin, TX 78746

\$350.00

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

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Soccer City

Date

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

Kirkpatrick, Mark (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code
718 Patterson Ave
Austin, TX 78703

\$200.00

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

Principal occupation / Job title (See Instructions)
Professor

Employer (See Instructions)
UT Austin

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 29/56 Report: 31/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date 05/01/2012
5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Koetz, Maureen (Ms.)

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

\$20.00

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

6 Contributor address; City; State; Zip Code
355 S. End Ave
New York, NY 10280

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 04/19/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Kralj, Elliot (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

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

Contributor address; City; State; Zip Code
3809 Gaines Ct
Austin, TX 78735

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/02/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Kramer, Kenneth (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$250.00

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

Contributor address; City; State; Zip Code
4204 Sinclair Ave
Austin, TX 78756

Principal occupation / Job title (See Instructions)
Director

Employer (See Instructions)
Sierra Club

Date 05/02/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Kyle, Barbara (Ms.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

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

Contributor address; City; State; Zip Code
50 Santa Marina St
San Francisco, CA 94110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/02/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Ladd, Lurleen (Ms.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$200.00

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

Contributor address; City; State; Zip Code
4606 Ridge Oak Dr.
Austin, TX 78731

Principal occupation / Job title (See Instructions)
Executive Director

Employer (See Instructions)
The Shade Project

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 30/56 Report: 32/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larson, Lafe (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 3505 Vara Dr Austin, TX 78754	7 Amount of contribution (\$) \$20.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 04/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lazar, Jennifer (Ms.) <hr/> Contributor address; City; State; Zip Code 806 West 28 1/2 Austin, TX 78705	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 04/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LeBlanc-Arbuckle, Wendy (Ms.) <hr/> Contributor address; City; State; Zip Code 1811 Burbank St. Austin, TX 78757	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Movement Educator		Employer (See Instructions) Self		
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Levenberg, Jeffrey (Mr.) <hr/> Contributor address; City; State; Zip Code 809 Edgecliff Terrace Austin, TX 78704	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Levenberg, Sheri (Ms.) <hr/> Contributor address; City; State; Zip Code 809 Edgecliff Terrace Austin, TX 78704	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
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: 31/56 Report: 33/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/19/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lomas, Rachel (Ms.) 6 Contributor address; City; State; Zip Code 212 West 33rd St Austin, TX 78705	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) Entrepreneur		10 Employer (See Instructions) Self		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lomas, Rachel (Ms.) Contributor address; City; State; Zip Code 212 West 33rd St Austin, TX 78705	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) Entrepreneur		Employer (See Instructions) Self		
Date 04/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maire, Simone (Ms.) Contributor address; City; State; Zip Code 508 Newhall Cove 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) Retired		Employer (See Instructions) N/A		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maness, Bruce (Mr.) Contributor address; City; State; Zip Code 4912 Rollingwood Dr Austin, TX 78746	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 04/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Elaine (Ms.) Contributor address; City; State; Zip Code 3306 Hemlock Ave. Austin, TX 78722	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: 32/56 Report: 34/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Nora (Ms.) 6 Contributor address; City; State; Zip Code 3302 Lafayette Ave Austin, TX 78722	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)		10 Employer (See Instructions)	
Date 04/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Mary Gay (Ms.) Contributor address; City; State; Zip Code 111 Laurel Ln Austin, TX 78705	Amount of contribution (\$) \$75.00	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McAfee, Mark (Mr.) Contributor address; City; State; Zip Code 1170 Ridgeway Dr. Austin, TX 78702	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)		Employer (See Instructions)	
Date 04/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCandless, Helen (Ms.) Contributor address; City; State; Zip Code 2101 Wilson St Austin, TX 78704	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 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCollough, Scott (Mr.) Contributor address; City; State; Zip Code 2290 Gatlin Creek Rd. Dripping Springs, TX 78620	Amount of contribution (\$) \$300.00	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) McCollough/Henry PC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 33/56 Report: 35/72	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meador, Marlene (Ms.) 6 Contributor address; City; State; Zip Code 6905 Shoal Creek Blvd Austin, TX 78757			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 04/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mehdy, Mona (Ms.) Contributor address; City; State; Zip Code 5004 Smokey Mountain Dr. Austin, TX 78727			Amount of contribution (\$) \$60.00	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 04/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melancon, Rebecca (Ms.) Contributor address; City; State; Zip Code 509 East 38th St Austin, TX 78705			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 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melder, Bobbie (Ms.) Contributor address; City; State; Zip Code 805 Battle Bend Blvd Austin, TX 78745			Amount of contribution (\$) \$75.00	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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melina Raab, Angela (Ms.) Contributor address; City; State; Zip Code 2606 Pegram Ave. 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)			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 34/56 Report: 36/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

04/30/2012

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

Melina Raab, Ted (Mr.)

6 Contributor address; City; State; Zip Code

2606 Pegram Ave.
Austin, TX 78757

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/19/2012

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

Mendez, Deirdre (Ms.)

Contributor address; City; State; Zip Code

2308 Spring Creek Dr.
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Administrator

Employer (See Instructions)
UT Austin

Date

04/21/2012

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

Menger, Gene (Mr.)

Contributor address; City; State; Zip Code

2101 Wilson St
Austin, TX 78704

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

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

Meyer, Amy (Ms.)

Contributor address; City; State; Zip Code

904 East Monroe St
Austin, TX 78704

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)

Employer (See Instructions)

Date

05/01/2012

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

Michael, Andrea (Ms.)

Contributor address; City; State; Zip Code

2504 Briargrove Dr
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

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: 35/56 Report: 37/72	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/20/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Milam, Mary (Ms.) 6 Contributor address; City; State; Zip Code 1211 Quail Park Dr. Austin, TX 78758	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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Amber (Ms.) Contributor address; City; State; Zip Code 4404 Travis Country Cir Austin, TX 78735	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 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Laurence (Mr.) Contributor address; City; State; Zip Code P.O. Box 49130 Austin, TX 78765	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) Retired			Employer (See Instructions) N/A		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Mike (Mr.) Contributor address; City; State; Zip Code 201 West Houston St Marshall, TX 75670	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		
Date 04/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Susan (Ms.) Contributor address; City; State; Zip Code 720 Park Blvd 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)			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 36/56 Report: 38/72	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filters) 00006000	
4 Date 04/27/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moffat, Susan (Ms.) 6 Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751		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) Researcher/Writer			10 Employer (See Instructions) Self		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moorman, Ted (Mr.) Contributor address; City; State; Zip Code 9006 Scotland Well Cove Austin, TX 78750		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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, Rick (Mr.) Contributor address; City; State; Zip Code 4405 Avenue H Austin, TX 78751		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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, Rick (Mr.) Contributor address; City; State; Zip Code 4405 Avenue H Austin, TX 78751		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 04/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, William Bradford (Mr.) Contributor address; City; State; Zip Code 8700 Brodie Ln Austin, TX 78745		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) Recruiter			Employer (See Instructions) Manpower		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 37/56 Report: 39/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/19/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphy, Michael Adam (Mr.) 6 Contributor address; City; State; Zip Code 1200 East 11th St Austin, TX 78702	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 04/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Niekamp, Patricia (Ms.) Contributor address; City; State; Zip Code 9321 Edwardson Ln 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)	
Date 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norton, Shana (Ms.) Contributor address; City; State; Zip Code 910 Post Oak Austin, TX 78704	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) Musician		Employer (See Instructions) Self	
Date 04/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oakey, William (Mr.) Contributor address; City; State; Zip Code 1507 B Elton Ln Austin, TX 78703	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Brien, Elizabeth (Ms.) Contributor address; City; State; Zip Code 2101 Oxford Ave. 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) Public Affairs		Employer (See Instructions) Pattern Energy	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 38/56 Report: 40/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

O'Brien, Elizabeth (Ms.)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/02/2012

6 Contributor address; City; State; Zip Code

2101 Oxford Ave.
Austin, TX 78704

\$150.00

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

9 Principal occupation / Job title (See Instructions)
Public Affairs

10 Employer (See Instructions)
Pattern Energy

Date

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

Opyt, Barbara (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/14/2012

Contributor address; City; State; Zip Code

4610 Ave B
Austin, TX 78751

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Orr, David (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/07/2012

Contributor address; City; State; Zip Code

5312 Avenue H
Austin, TX 78751

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Orr, Renee (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/07/2012

Contributor address; City; State; Zip Code

5312 Avenue H
Austin, TX 78751

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Oteri, Willie (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code

508 Bellevue Place
Austin, TX 78705

\$25.00

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

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: 39/56 Report: 41/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/18/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Page, Susan (Ms.) 6 Contributor address; City; State; Zip Code 5704 Jim Hogg Ave. Austin, TX 78756	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 04/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Palmer, Janet (Ms.) Contributor address; City; State; Zip Code 5505 Hero Dr. Austin, TX 78735	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 04/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parker, Christopher (Mr.) Contributor address; City; State; Zip Code 1503 Betty Jo Dr Austin, TX 78704	Amount of contribution (\$) \$175.00	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 04/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Payne, Lisa (Ms.) Contributor address; City; State; Zip Code 2701 Cavileer Ave 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)		Employer (See Instructions)		
Date 04/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Payne, Terry (Mr.) Contributor address; City; State; Zip Code 2701 Cavileer Ave 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)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/56 Report: 42/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pearsall, Madeleine (Ms.) 6 Contributor address; City; State; Zip Code 4606 Richmond Ave Austin, TX 78745	7 Amount of contribution (\$) \$70.90	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 04/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peel, Deborah (Ms.) Contributor address; City; State; Zip Code P.O. Box 248 Austin, TX 78767	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) Advocate		Employer (See Instructions) Self	
Date 04/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peel, Larry (Mr.) Contributor address; City; State; Zip Code P.O. Box 248 Austin, TX 78767	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) Builder/Developer		Employer (See Instructions) Self	
Date 04/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez-Wisely, Teresa (Ms.) Contributor address; City; State; Zip Code 909 Theresa Ave Austin, TX 78703	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 04/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perkins, Jerry (Mr.) Contributor address; City; State; Zip Code 4128 Lawless Dr. Austin, TX 78723	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 41/56 Report: 43/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peters, Kendra (Ms.) 6 Contributor address; City; State; Zip Code 2203 East 20th St Austin, TX 78722	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)		10 Employer (See Instructions)		
Date 04/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pierce, Paula (Ms.) Contributor address; City; State; Zip Code 6105 Gena Ct 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)		Employer (See Instructions)		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pingree, Dianne (Ms.) Contributor address; City; State; Zip Code 1501 Crested Butte Dr. Austin, TX 78746	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pingree, Harlan (Mr.) Contributor address; City; State; Zip Code 1501 Crested Butte Dr. Austin, TX 78746	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pipkin, Stan (Mr.) Contributor address; City; State; Zip Code 2100 B Wordsworth Austin, TX 78704	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) Architect		Employer (See Instructions) Lighthouse Solar		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 42/56 Report: 44/72	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/27/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prisant, Caroline (Ms.)		7 Amount of contribution (\$) \$20.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 508 Newhall Cove Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Student			10 Employer (See Instructions) None		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prisant, Caroline (Ms.)		Amount of contribution (\$) \$330.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 508 Newhall Cove Austin, TX 78746			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Student			Employer (See Instructions) None		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Redman, Steve (Mr.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 633 Twelve Oaks Ln Austin, TX 78704			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rittenhouse, Ryan (Mr.)		Amount of contribution (\$) \$10.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1603 B Morgan Ln Austin, TX 78704			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 04/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Nita (Ms.)		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 301 E Broadway Ave Bismarck, ND 58501			(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: 43/56 Report: 45/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Steve (Mr.) 6 Contributor address; City; State; Zip Code 11823 Eubank Dr. Austin, TX 78758	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rockwell, Brad (Mr.) Contributor address; City; State; Zip Code 1910 Edgeware 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) Attorney		Employer (See Instructions) Lowerre, Frederick, Perales, Allmon & Rockwell		
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Mark (Mr.) Contributor address; City; State; Zip Code 1104 E 10th St Austin, TX 78702	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) Affordable Housing Developer		Employer (See Instructions) GNDC		
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Romero, Ron (Mr.) Contributor address; City; State; Zip Code 6211 Woodhue Dr Austin, TX 78745	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 04/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ross, Lauren (Ms.) Contributor address; City; State; Zip Code 1405 Hillmont Austin, TX 78704	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) Glenrose Engineering		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 44/56 Report: 46/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Ross, Shirley (Ms.)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/01/2012

6 Contributor address; City; State; Zip Code

6603 Mesa Hollow Dr
Austin, TX 78750

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Sak, Catherine (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/05/2012

Contributor address; City; State; Zip Code

1416 Berkshire Dr.
Austin, TX 78723

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Sanger, Mary (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/28/2012

Contributor address; City; State; Zip Code

704 Carolyn Ave
Austin, TX 78705

\$250.00

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

Principal occupation / Job title (See Instructions)
Research

Employer (See Instructions)
Self

Date

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

Sawhill, Steve (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/07/2012

Contributor address; City; State; Zip Code

1906 Frazier
Austin, TX 78704

\$20.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Sawyer, Peter (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/14/2012

Contributor address; City; State; Zip Code

3506 Far View Dr
Austin, TX 78730

\$100.00

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

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: 45/56 Report: 47/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schagen, Tracy (Ms.) 6 Contributor address; City; State; Zip Code 8319 Haskel Dr Austin, TX 78736	7 Amount of contribution (\$) \$10.00	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 04/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Searcy, Judith (Ms.) Contributor address; City; State; Zip Code 821 Harris Ave. 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 04/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Searcy, Seth (Mr.) Contributor address; City; State; Zip Code 821 Harris Ave. 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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sedwick, Shannon (Ms.) Contributor address; City; State; Zip Code 350 King Arthur Court 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) Theatre Owner		Employer (See Instructions) Esther's Follies	
Date 04/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Selby, Tom (Mr.) Contributor address; City; State; Zip Code 2013 North Roosevelt St Arlington, VA 22205	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) Williams and Connolly, LLP	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 46/56 Report: 48/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Senor, Robin (Ms.)

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

04/06/2012

6 Contributor address; City; State; Zip Code

2607 Geraghty Ave
Austin, TX 78757

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Sharpe, Susanna (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

04/21/2012

Contributor address; City; State; Zip Code

1302 Karen Ave.
Austin, TX 78757

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Shelton, Kaley (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

05/02/2012

Contributor address; City; State; Zip Code

4105 Great Plains Dr
Austin, TX 78735

\$20.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Smith, Sherry (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

04/21/2012

Contributor address; City; State; Zip Code

700 Windsong Tr
Austin, TX 78746

\$250.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Marketing StrategistEmployer (See Instructions)
Sherry Smith Marketing Partner

Date

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

Smolen, Paul (Mr.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

04/13/2012

Contributor address; City; State; Zip Code

3812 Cherrywood Rd
Austin, TX 78722

\$50.00

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

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: 47/56 Report: 49/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/24/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Solmon, Marty (Mr.) 6 Contributor address; City; State; Zip Code 12044 County Hwy 17 Detroit Lakes, MN 56501	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)		10 Employer (See Instructions)		
Date 04/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Solmon, Mary (Ms.) Contributor address; City; State; Zip Code 12044 County Hwy 17 Detroit Lakes, MN 56501	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)		Employer (See Instructions)		
Date 04/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sosa, Guadalupe (Ms.) Contributor address; City; State; Zip Code P.O. Box 40205 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)		Employer (See Instructions)		
Date 04/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Souhami, Gloria (Ms.) Contributor address; City; State; Zip Code 802 Norwalk Ln Austin, TX 78703	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 04/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speights, Sara (Ms.) Contributor address; City; State; Zip Code 2701 West 49 1/2 St Austin, TX 78731	Amount of contribution (\$) \$75.00	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: 48/56 Report: 50/72	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speir, Stephen (Mr.) 6 Contributor address; City; State; Zip Code 1225 Corona Dr Austin, TX 78723	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sperry, Teri (Ms.) Contributor address; City; State; Zip Code 2213 Willow St Austin, TX 78702	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 04/15/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Starche, Paula (Ms.) Contributor address; City; State; Zip Code 3215 Breeze Terrace Austin, TX 78722	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 04/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sterzing, Philip (Mr.) Contributor address; City; State; Zip Code 1407 W 51st St 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)		Employer (See Instructions)		
Date 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stevens, Jean (Ms.) Contributor address; City; State; Zip Code 1619 West 14th St 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)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 49/56 Report: 51/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stevens, Steve (Mr.) 6 Contributor address; City; State; Zip Code 1619 West 14th St 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)		10 Employer (See Instructions)	
Date 04/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Strover, Sharon (Ms.) Contributor address; City; State; Zip Code 5104 Beverly Skyline 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) Professor		Employer (See Instructions) UT Austin	
Date 04/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sundaralingam, Manjula (Ms.) Contributor address; City; State; Zip Code 7903 Cheno Cortina Tr Austin, TX 78749	Amount of contribution (\$) \$27.00	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 04/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sussman, Soll (Mr.) Contributor address; City; State; Zip Code 6117 Mountain Villa Cove Austin, TX 78731	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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas, Grant (Mr.) Contributor address; City; State; Zip Code 4106 Ave F Austin, TX 78751	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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 50/56 Report: 52/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Thomas, Margot (Ms.)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

05/02/2012

6 Contributor address: City: State: Zip Code

4106 Ave F
Austin, TX 78751

\$150.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Trejo, Naomi (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/01/2012

Contributor address: City: State: Zip Code

1002 Olive Street
Austin, TX 78702

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Trusty, Robbin (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/19/2012

Contributor address: City: State: Zip Code

2630 Barton Hills Dr.
Austin, TX 78704

\$350.00

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

Principal occupation / Job title (See Instructions)

Project Manager

Employer (See Instructions)

Austin Energy

Date

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

Tulis, Jeffrey (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

04/30/2012

Contributor address: City: State: Zip Code

7105 Running Rope
Austin, TX 78731

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Tuttrup, Neal (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

05/02/2012

Contributor address: City: State: Zip Code

4204 Speedway #204
Austin, TX 78751

\$10.00

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

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: 51/56 Report: 53/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

04/23/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Umphress, Dorothy (Ms.)

6 Contributor address; City; State; Zip Code
2057 Rosebud Dr.
Irving, TX 75060

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)

10 Employer (See Instructions)

Date

05/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Waller, Kathryn (Ms.)

Contributor address; City; State; Zip Code
P.O. Box 201394
Austin, TX 78720

Amount of
contribution (\$)

\$5.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walton, Marsha (Ms.)

Contributor address; City; State; Zip Code
1701 Bouldin Ave
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walton, Marsha (Ms.)

Contributor address; City; State; Zip Code
1701 Bouldin Ave
Austin, TX 78704

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Warner, Angel (Mr.)

Contributor address; City; State; Zip Code
520 Palo Duro
Joshua, TX 76058

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)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 52/56 Report: 54/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

04/26/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Warren, Kate (Ms.)

6 Contributor address; City; State; Zip Code
1508 Elton Ln
Austin, TX 78703

7 Amount of contribution (\$)

\$87.50

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/26/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Warren, Mark (Mr.)

Contributor address; City; State; Zip Code
1508 Elton Ln
Austin, TX 78703

Amount of contribution (\$)

\$87.50

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Weldon, Matt (Mr.)

Contributor address; City; State; Zip Code
9808 Grand Oak Dr
Austin, TX 78750

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/19/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Welsh, Jacquelyn (Ms.)

Contributor address; City; State; Zip Code
5713 Steven Creek Way
Austin, TX 78721

Amount of contribution (\$)

\$30.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/26/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Whitfield, John (Mr.)

Contributor address; City; State; Zip Code
5900 Rain Creek Pkwy
Austin, TX 78759

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
GSRJW

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 53/56 Report: 55/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 04/08/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whitley, Tracey (Ms.) 6 Contributor address; City; State; Zip Code 908 Payne Ave Austin, TX 78757	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 05/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wickert, Julie (Ms.) Contributor address; City; State; Zip Code 8303 Polar Dr Austin, TX 78757	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)		Employer (See Instructions)	
Date 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Chad (Mr.) Contributor address; City; State; Zip Code 7500 Greenhaven Dr Austin, TX 78757	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 04/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williamson, Tina (Ms.) Contributor address; City; State; Zip Code 525 Barton Blvd 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 05/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilson, Jack (Mr.) Contributor address; City; State; Zip Code 4803 Ave H Austin, TX 78751	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 54/56 Report: 56/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date 04/06/2012
5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Worley, John (Mr.)

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

\$50.00

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

6 Contributor address; City; State; Zip Code
4106 Avenue A
Austin, TX 78751

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 04/06/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Worley, Soledad (Ms.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$25.00

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

Contributor address; City; State; Zip Code
4106 Avenue A
Austin, TX 78751

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/22/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Wuertz, Ellen (Ms.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$50.00

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

Contributor address; City; State; Zip Code
7409 Barcelona Dr
Austin, TX 78752

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/20/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Yackman, Ellyn (Ms.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$350.00

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

Contributor address; City; State; Zip Code
3571 Far West Blvd #82
Austin, TX 78731

Principal occupation / Job title (See Instructions)
Housewife

Employer (See Instructions)
N/A

Date 04/26/2012
Full name of contributor ☐ out-of-state PAC (ID# _____)
Yates, Ira Jon (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$350.00

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

Contributor address; City; State; Zip Code
5711 State Hwy 45
Austin, TX 78739

Principal occupation / Job title (See Instructions)
Rancher

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 55/56 Report: 57/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Yates, Roxanne (Ms.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

04/26/2012

6 Contributor address; City; State; Zip Code
5711 State Hwy 45
Austin, TX 78739

\$350.00

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
N/A

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/04/2012

Contributor address; City; State; Zip Code
2105 B Ann Arbor Ave.
Austin, TX 78704

\$250.00

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

Principal occupation / Job title (See Instructions)
Management

Employer (See Instructions)
State Department of Housing

Date

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

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/01/2012

Contributor address; City; State; Zip Code
2105 B Ann Arbor Ave.
Austin, TX 78704

\$100.00

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

Principal occupation / Job title (See Instructions)
Management

Employer (See Instructions)
State Department of Housing

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
York, Carrie (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/20/2012

Contributor address; City; State; Zip Code
4804 Philco
Austin, TX 78745

\$5.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Young, Don (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/21/2012

Contributor address; City; State; Zip Code
P.O. Box 684331
Austin, TX 78768

\$100.00

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

Principal occupation / Job title (See Instructions)
Internet Marketing

Employer (See Instructions)
Young & Associates

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 56/56 Report: 58/72

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

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

Young, Don (Mr.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

05/01/2012

6 Contributor address; City; State; Zip Code
P.O. Box 684331
Austin, TX 78768

\$150.00

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

9 Principal occupation / Job title (See Instructions)
Internet Marketing

10 Employer (See Instructions)
Young & Associates

Date

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

Zamrazil, Kristie (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

04/06/2012

Contributor address; City; State; Zip Code
1819 Piedmont Ave.
Austin, TX 78757

\$75.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Zaretsky, Janel (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/01/2012

Contributor address; City; State; Zip Code
13110 Bayfield Dr
Austin, TX 78727

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 59/72	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 TOTAL OF UNITEMIZED LOANS: ⇄⇄⇄⇄⇄⇄		\$	
5 Date of loan 05/02/2012	7 Name of lender Shea, Brigid (Ms.) <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$) \$40,000.00	
6 Is lender a financial Institution? No	8 Lender address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757	10 Interest rate n/a	
		11 Maturity date 05/12/2012	
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)	
20 Principal Occupation		21 Employer	

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: 1/12 Report: 60/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/04/2012	5 Payee name Arriba News				
6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code P.O. Box 12865 Austin, TX 78711				
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"/> Political Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/28/2012	Payee name Atherton, Leeann (Ms.)				
Amount (\$) \$200.00	Payee address City; State; Zip Code 3600 S. 2nd St Austin, TX 78704				
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"/> Music Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/02/2012	Payee name Blue Utopia				
Amount (\$) \$42.97	Payee address City; State; Zip Code P.O. Box 4486 Seattle, WA 98194				
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"/> Cumulative donation processing fees for reporting period		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/10/2012	Payee name City of Austin Utilities				
Amount (\$) \$459.34	Payee address City; State; Zip Code P.O. Box 2267 Austin, TX 78783				
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"/> Campaign Office Utilities		
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: 2/12 Report: 61/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/09/2012	5 Payee name Constant Contact				
6 Amount (\$) \$53.30	7 Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
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"/> Automated Marketing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/27/2012	Payee name Constant Contact				
Amount (\$) \$2.31	Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
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"/> Image Hosting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/30/2012	Payee name Cricket Communications				
Amount (\$) \$105.84	Payee address City; State; Zip Code 1030 Norwood Park Blvd. Bldg 4 Ste 406 Austin, TX 78753				
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"/> Phone Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/17/2012	Payee name Crook, Vanessa (Ms.)				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
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 # **2** FILER NAME **3** ACCOUNT # (TEC filers)
Schedule: 3/12 Report: 62/72 Shea, Brigid (Ms.) 00006000

4 Date **5** Payee name
04/16/2012 David Thomas Photography

6 Amount (\$) **7** Payee address City; State; Zip Code
\$250.00 2004-B E 9th St
Austin, TX 78702

8 PURPOSE OF EXPENDITURE **(a)** Category (See Categories listed at the top of this schedule) **(b)** Description (If travel outside of Texas, complete Schedule T) ☐
Advertising Expense Photo Shoot

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date Payee name
04/28/2012 FedEx Office

Amount (\$) Payee address City; State; Zip Code
\$21.65 327 Congress Ave
Austin, TX 78701

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Office Overhead/Rental Expense Postcards

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date Payee name
05/01/2012 Gage Furniture

Amount (\$) Payee address City; State; Zip Code
\$2,500.00 P.O. Box 5816
Austin, TX 78763

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Office Overhead/Rental Expense Campaign Office Rent

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:

Date Payee name
04/10/2012 Grande Communications

Amount (\$) Payee address City; State; Zip Code
\$131.86 1923 E. 7th St
STE 100
Austin, TX 78702

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) ☐
Office Overhead/Rental Expense Internet and Phone Services

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: 4/12 Report: 63/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/25/2012	5 Payee name Greenberg, Joel (Mr.)				
6 Amount (\$) \$1,000.00	7 Payee address City; State; Zip Code 6806 Daugherty Austin, TX 78757				
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"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/26/2012	Payee name Harden, Ada (Ms.)				
Amount (\$) \$350.00	Payee address City; State; Zip Code 1700 Meander Drive Austin, TX 78721				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/26/2012	Payee name Harden, Ada (Ms.)				
Amount (\$) \$105.00	Payee address City; State; Zip Code 1700 Meander Drive Austin, TX 78721				
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"/> Leafletting Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/03/2012	Payee name In Fact Daily				
Amount (\$) \$108.25	Payee address City; State; Zip Code 305 South Congress Ave 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"/> News Subscription		
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: 5/12 Report: 64/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/02/2012	5 Payee name M.J. Ross Group, Inc.				
6 Amount (\$) \$197.39	7 Payee address City; State; Zip Code P.O. Box 19037 Portland, OR 97280				
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"/> Automated Marketing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/17/2012	Payee name McNally, John (Mr.)				
Amount (\$) \$1,600.00	Payee address City; State; Zip Code 3002 Breeze Terrace Austin, TX 78722				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/17/2012	Payee name Oak Hill Gazette				
Amount (\$) \$270.00	Payee address City; State; Zip Code 7200-B Hwy 71 West Austin, TX 78735				
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"/> Political Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/10/2012	Payee name Office Depot				
Amount (\$) \$95.24	Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Ink for Office Printers		
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: 6/12 Report: 65/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/24/2012	5 Payee name Office Depot				
6 Amount (\$) \$157.60	7 Payee address City: State: Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Printing/Copying Services		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/30/2012	Payee name Office Depot				
Amount (\$) \$265.97	Payee address City: State: Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Printing/Copying Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/30/2012	Payee name Office Depot				
Amount (\$) \$59.48	Payee address City: State: Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Printing/Copying Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/02/2012	Payee name Office Depot				
Amount (\$) \$126.37	Payee address City: State: Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Printing/Copying Services		
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: 7/12 Report: 66/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/02/2012	5 Payee name Office Depot				
6 Amount (\$) \$265.97	7 Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Printing/Copying Services		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/02/2012	Payee name Office Depot				
Amount (\$) \$27.05	Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Office Supplies - paper		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/03/2012	Payee name Office Max				
Amount (\$) \$55.67	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Printing/Copying Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/04/2012	Payee name Office Max				
Amount (\$) \$23.58	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78756				
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"/> Copy Service		
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: 8/12 Report: 67/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000
4 Date 04/30/2012	5 Payee name Office Max			
6 Amount (\$) \$8.65	7 Payee address City: State: Zip Code 4615 North Lamar Blvd Austin, TX 78756			
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"/> Office Supplies - cards	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/01/2012	Payee name Office Max			
Amount (\$) \$134.20	Payee address City: State: Zip Code 907 West Fifth Street Austin, TX 78703			
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"/> Office Supplies - label, printer ink	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 04/13/2012	Payee name Opinion Analysts, Inc.			
Amount (\$) \$7,200.00	Payee address City: State: Zip Code 906 Rio Grande St Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Polling	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 04/09/2012	Payee name Parham, Amy (Ms.)			
Amount (\$) \$3,000.00	Payee address City: State: Zip Code P.O. Box 1136 Buda, TX 78610			
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"/> Salary	
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: 9/12 Report: 68/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/25/2012	5 Payee name Parham, Amy (Ms.)				
6 Amount (\$) \$3,000.00	7 Payee address City; State; Zip Code P.O. Box 1136 Buda, TX 78610				
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"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/02/2012	Payee name Paypal				
Amount (\$) \$275.71	Payee address City; State; Zip Code 2145 Hamilton Avenue San Jose, CA 95125				
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"/> Cumulative donation processing fees for reporting period		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/17/2012	Payee name Raab, Angela Melina (Ms.)				
Amount (\$) \$1,000.00	Payee address City; State; Zip Code 2606 Pegram Ave Austin, TX 78757				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/01/2012	Payee name Rindy & Associates, Inc.				
Amount (\$) \$10,000.00	Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702				
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"/> Political Advertising		
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: 10/12 Report: 69/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/26/2012	5 Payee name Skeletour, LLC				
6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 3800 N Lamar Blvd #730-305 Austin, TX 78756				
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) <input type="checkbox"/> Music Services		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/03/2012	Payee name Smith, Natasha (Ms.)				
Amount (\$) \$200.00	Payee address City; State; Zip Code 4005 Wrightwood Road Austin, TX 78722				
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"/> Contract Labor for Design/Layout		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/02/2012	Payee name Square				
Amount (\$) \$82.03	Payee address City; State; Zip Code 110 5th Street San Francisco, CA 94103				
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"/> Cumulative credit card processing fees for reporting period		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/21/2012	Payee name Texas Democratic Party				
Amount (\$) \$100.00	Payee address City; State; Zip Code 505 West 12th Street Suite 200 Austin, TX 78704				
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"/> Booth at Convention		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/12 Report: 70/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 04/23/2012	5 Payee name The Austin Chronicle				
6 Amount (\$) \$1,094.00	7 Payee address City; State; Zip Code P.O. Box 49066 Austin, TX 78765				
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"/> Political Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/27/2012	Payee name The Austin Chronicle				
Amount (\$) \$1,345.00	Payee address City; State; Zip Code P.O. Box 49066 Austin, TX 78765				
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"/> Political Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/05/2012	Payee name The Nighthawk Frisco				
Amount (\$) \$31.61	Payee address City; State; Zip Code 6801 Burnet Rd Austin, TX 78757				
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"/> Staff lunch		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/30/2012	Payee name T-Mobile				
Amount (\$) \$55.13	Payee address City; State; Zip Code 4700 W Guadalupe STE 1 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"/> Phone Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Printing Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees		Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/12 Report: 71/72		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000
4 Date 04/30/2012	5 Payee name United States Postal Service Buda Station			
6 Amount (\$) \$810.00	7 Payee address City; State; Zip Code 1320 Cabelas Drive Buda, TX 78610			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/02/2012	Payee name United States Postal Service Northcross Station			
Amount (\$) \$225.00	Payee address City; State; Zip Code 7700 Northcross Dr Austin, TX 78757			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 04/10/2012	Payee name Worley Printing Co., Inc.			
Amount (\$) \$1,098.74	Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
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"/> Doorhangers	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 04/10/2012	Payee name yousendit			
Amount (\$) \$9.99	Payee address City; State; Zip Code 1919 S Bascom Ave 3rd Floor Campbell, CA 95008			
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"/> File Sharing Subscription Service	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

**INTEREST EARNED, OTHER CREDITS/GAINS/
REFUNDS, AND PURCHASE OF INVESTMENTS****SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 72/72**2** FILER NAME Shea, Brigid (Ms.)**3** ACCOUNT # (Ethics Commission filers)
00006000

4 Date 04/05/2012	5 Name of person from whom amount is received JPMorgan Chase Bank, N.A. 6 Address of person from whom amount is received; City; State; Zip Code 7600 Burnet Road Austin, TX 78757	8 Amount (\$) \$0.13
7 Purpose for which amount is received Interest on Checking Account		

Date 04/13/2012	Name of person from whom amount is received Paypal Address of person from whom amount is received; City; State; Zip Code 2145 Hamilton Avenue San Jose, CA 95125	Amount (\$) \$0.20
Purpose for which amount is received Credit to verify Bank Account		

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)
00006000

2 PAGE #
1 of 44

**3 CANDIDATE /
OFFICEHOLDER
NAME**

 MS / MRS / MR FIRST MI
 Ms. Brigid
 NICKNAME LAST SUFFIX
 Shea
OFFICE USE ONLY

Date Received

 2012 JUL 16
 PM 4
 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
 2604 Geraghty Ave.
 Austin, TX 78757

☐ Change of Address

**5 CAMPAIGN
TREASURER
NAME**

 MS / MRS / MR FIRST MI
 Ms. Danette
 NICKNAME LAST SUFFIX
 Chimenti

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

 STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
 200 The Circle
 Austin, TX 78704

**7 CAMPAIGN
TREASURER
PHONE**

 AREA CODE PHONE NUMBER EXTENSION
 (512) 912-8290
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
 05/03/2012 THROUGH 06/30/2012
10 ELECTION
 ELECTION DATE
 Month Day Year
 05/12/2012

ELECTION TYPE

☐ Primary ☐ Runoff ☒ General ☐ Special
11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

Mayor

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Shea, Brigid (Ms.)

14 ACCOUNT # (Ethics Commission filers)
0000600015 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

\$

25.00

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

\$

12,775.00

EXPENDITURE
TOTALS

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

96,880.25

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

\$

1,895.97

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

\$

62,500.00

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.

Brigid Shea
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brigid Shea, this the 16th day of July, 2012, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Aaron Samaniego
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. 1/26 Report: 3/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allen, Stephen (Mr.) 6 Contributor address; City; State; Zip Code 6406 Wilbur Dr Austin, TX 78757	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 05/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alsop, Marion (Ms.) Contributor address; City; State; Zip Code 2311 Pruett Austin, TX 78703	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 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andrews, Will (Mr.) Contributor address; City; State; Zip Code P.O. Box 684154 Austin, TX 78760	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 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Archer, Sam (Mr.) Contributor address; City; State; Zip Code 1511 A West 10th St Austin, TX 78703	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 06/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aroian, Karen (Ms.) Contributor address; City; State; Zip Code 3005 McElroy Dr Austin, TX 78757	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: 2/26 Report: 4/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/03/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arora, Ash (Mr.) 6 Contributor address; City; State; Zip Code 501 Olympic Dr Pflugerville, TX 78660	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 05/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barrera, Mari (Ms.) Contributor address; City; State; Zip Code 7 Tibbetts St Natick, MA 01760	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 05/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beasley, Roger (Mr.) Contributor address; City; State; Zip Code 6503 Santolina Cove 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) Roger Beasley Mazda	
Date 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Becker, Al (Mr.) Contributor address; City; State; Zip Code 3656 Ranch Creek Dr Austin, TX 78730	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 05/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bender, Bob (Mr.) Contributor address; City; State; Zip Code 406 Sterzing 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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/26 Report: 5/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Benner, Jeff (Mr.) 6 Contributor address; City; State; Zip Code 809 Bouldin Austin, TX 78704	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 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Benner, Jennifer (Ms.) Contributor address; City; State; Zip Code 809 Bouldin Austin, TX 78704	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 05/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bottoms, Shirley (Ms.) Contributor address; City; State; Zip Code 3903 Ridgelea Dr Austin, TX 78731	Amount of contribution (\$) \$40.00	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 05/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Braun, Carl (Mr.) Contributor address; City; State; Zip Code 2506 Douglas St Austin, TX 78741	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 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Allen (Mr.) Contributor address; City; State; Zip Code 1817 East Oltorf Apt 1023 Austin, TX 78741	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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/26 Report: 6/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brooks, Susan (Ms.) 6 Contributor address; City; State; Zip Code 1613 South 3rd 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)		10 Employer (See Instructions)	
Date 05/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campbell, Sarah (Ms.) Contributor address; City; State; Zip Code 1201 Woodland 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)		Employer (See Instructions)	
Date 05/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Jennifer (Ms.) Contributor address; City; State; Zip Code 500 Lone Oak Austin, TX 78704	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) Investor		Employer (See Instructions) Self	
Date 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Mark (Mr.) Contributor address; City; State; Zip Code 600 Los Lomas Dr Austin, TX 78746	Amount of contribution (\$) \$40.00	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 05/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clarke, Margot (Ms.) Contributor address; City; State; Zip Code 5106 Evergreen Ct. Austin, TX 78731	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/26 Report: 7/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cochran, Kevin (Mr.) 6 Contributor address; City; State; Zip Code 412 Alpine Rd Apt 5 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)		10 Employer (See Instructions)	
Date 05/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, Rick (Mr.) Contributor address; City; State; Zip Code 1512 A Pennsylvania Ave 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)		Employer (See Instructions)	
Date 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coleman, Pamela (Ms.) Contributor address; City; State; Zip Code 10908 Centennial Tr 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)	
Date 05/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Corbin, Robert (Mr.) Contributor address; City; State; Zip Code 608 Cliff Dr 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 05/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Creighton, Sonda (Ms.) Contributor address; City; State; Zip Code 6301 Bon Terra Dr Austin, TX 78731	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: 6/26 Report: 8/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 06/23/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crow, Dan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 2803 Down Cove Austin, TX 78704	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) <hr/> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cunningham, Ben (Mr.) <hr/> Contributor address; City; State; Zip Code 2923 Bushnell Dr Austin, TX 78745	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) <hr/> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Ben Cunningham	
Date 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code 3307 Bryker Dr Austin, TX 78703	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) <hr/> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel, Lee (Mr.) <hr/> Contributor address; City; State; Zip Code 2011 EM Franklin Ave Austin, TX 78723	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) <hr/> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeYoung, Claire (Ms.) <hr/> Contributor address; City; State; Zip Code P.O. Box 684236 Austin, TX 78768	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <hr/> (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: 7/26 Report: 9/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 06/27/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dobbs, David (Mr.) 6 Contributor address; City; State; Zip Code 9702 Swansons Ranch Rd Austin, TX 78748	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) Retired		10 Employer (See Instructions) N/A	
Date 05/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doze, Danny (Mr.) Contributor address; City; State; Zip Code 2210 Enfield Rd #10 Austin, TX 78703	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 05/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dulaney Smith, Karen (Ms.) Contributor address; City; State; Zip Code 2120 Barton Hills Dr 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)		Employer (See Instructions)	
Date 05/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Durst, Philip (Mr.) Contributor address; City; State; Zip Code 4101 Ave C Austin, TX 78751	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)		Employer (See Instructions)	
Date 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eckhardt, Nadine (Ms.) Contributor address; City; State; Zip Code 2110 La Casa 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)		Employer (See Instructions)	

SCHEDULE A

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/26 Report: 11/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 06/29/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilbert, Bob (Mr.) 6 Contributor address; City; State; Zip Code 4212 Bellvue Ave Austin, TX 78756	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 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goff, Gayle (Ms.) Contributor address; City; State; Zip Code 1106 Upland Austin, TX 78741	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 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goff, Vicki (Ms.) Contributor address; City; State; Zip Code 2702 Princeton Dr Austin, TX 78741	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 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gooby, Pamela (Ms.) Contributor address; City; State; Zip Code 3101 Westlake Dr Austin, TX 78746	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 05/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerrero, Linda (Ms.) Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705	Amount of contribution (\$) \$125.00	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: 10/26 Report: 12/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/22/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Halverson, Wes (Mr.) 6 Contributor address; City; State; Zip Code 430 Mapleridge Dr Stevens Point, WI 54481	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 05/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Yvonne (Ms.) Contributor address; City; State; Zip Code 6206 Hillston Dr Austin, TX 78745	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 05/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Lisa (Ms.) Contributor address; City; State; Zip Code 4522 Avenue F Austin, TX 78751	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 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harley, Ann (Ms.) Contributor address; City; State; Zip Code 2111 Airle Way 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)		Employer (See Instructions)	
Date 05/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hemphill, Jim (Mr.) Contributor address; City; State; Zip Code 605 E 49th St Austin, TX 78751	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) Attorney		Employer (See Instructions) Graves Dougherty Hearon & Moody	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/26 Report: 13/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoegen-Dijkhof, Janet (Ms.) 6 Contributor address; City; State; Zip Code 8405 Old Bee Caves Rd #1621 Austin, TX 78735	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 05/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudkins, Mike (Mr.) Contributor address; City; State; Zip Code 500 E Riverside #267 Austin, TX 78704	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) General Manager		Employer (See Instructions) Texas Office Products	
Date 05/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hulting, Jane (Ms.) Contributor address; City; State; Zip Code 8130 Cedar Road Elkins Park, PA 19027	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)		Employer (See Instructions)	
Date 06/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hunt, Amy (Ms.) Contributor address; City; State; Zip Code 2408 Bluffview Dr. Austin, TX 78704	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 05/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hunt, Tom (Mr.) Contributor address; City; State; Zip Code 809 W 32nd St 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) Architect		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/26 Report: 14/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iscoe, Neil (Mr.) 6 Contributor address; City; State; Zip Code 3415 Mt Barker Austin, TX 78731	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 05/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jacoby, Jeffrey (Mr.) Contributor address; City; State; Zip Code 4401 Speedway #113 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)		Employer (See Instructions)	
Date 05/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Tim (Mr.) Contributor address; City; State; Zip Code 313 Lone Oak Dr Austin, TX 78704	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) Retired		Employer (See Instructions) N/A	
Date 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kampa, Marcellina (Ms.) Contributor address; City; State; Zip Code 1813 Treadwell 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 05/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kass, James (Mr.) Contributor address; City; State; Zip Code 1511 Garnaas Dr 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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 13/26 Report: 15/44		
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000		
4 Date 06/10/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelly, Mary (Ms.) 6 Contributor address; City; State; Zip Code 725 Patterson Austin, TX 78703		7 Amount of contribution (\$) \$75.00	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 05/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kendall, Joe (Mr.) Contributor address; City; State; Zip Code 801 West Gibson 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)			Employer (See Instructions)		
Date 05/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kendall, Joe (Mr.) Contributor address; City; State; Zip Code 801 West Gibson Austin, TX 78704		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 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Klee, Rose Marie (Ms.) Contributor address; City; State; Zip Code 1908 E 18th St Austin, TX 78702		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)			Employer (See Instructions)		
Date 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Land, Linda (Ms.) Contributor address; City; State; Zip Code 1106 Upland Dr Austin, TX 78741		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: 14/26 Report: 16/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/08/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lane, Lindsey (Ms.) 6 Contributor address; City; State; Zip Code 2004 Woodrich Ave. Austin, TX 78704	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 05/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lee, Carol (Ms.) Contributor address; City; State; Zip Code 3506 Far View Dr Austin, TX 78730	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 05/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Legg, Edward (Mr.) Contributor address; City; State; Zip Code 28 River's Edge Dr Kennebunk, MA 04043	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 05/09/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Kevin (Mr.) Contributor address; City; State; Zip Code 1002 Bouldin Ave 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)		Employer (See Instructions)	
Date 05/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lincoln, Anna (Ms.) Contributor address; City; State; Zip Code P.O. Box 244 Palisade, CO 81526	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/26 Report: 17/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/06/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Locke, Jere (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box 40637 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)		10 Employer (See Instructions)	
Date 06/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowerre, Richard (Mr.) Contributor address; City; State; Zip Code 725 Patterson Ave Austin, TX 78703	Amount of contribution (\$) \$75.00	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 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loyer, Bruce (Mr.) Contributor address; City; State; Zip Code 7202 Rusty Fig 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)		Employer (See Instructions)	
Date 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mangan, Andrew (Mr.) Contributor address; City; State; Zip Code 1906 Apricot Glen Austin, TX 78746	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 05/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Patricia Elaine (Ms.) Contributor address; City; State; Zip Code 3306 Hemlock Ave Austin, TX 78722	Amount of contribution (\$) \$300.00	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) Self/Eastside Cafe	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 16/26 Report: 18/44	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mathis, Mary Nell (Ms.) 6 Contributor address; City; State; Zip Code 6300 Mercedes Bend Austin, TX 78759		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)			10 Employer (See Instructions)	
Date 05/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthews, Ester (Ms.) Contributor address; City; State; Zip Code 310 East Live Oak 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 06/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mayton, Emma (Ms.) Contributor address; City; State; Zip Code 7101 Daugherty St Austin, TX 78757		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 05/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLeod, Mary (Ms.) Contributor address; City; State; Zip Code 1313 Alameda Dr 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 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mehdy, Mona (Ms.) Contributor address; City; State; Zip Code 5004 Smokey Mountain Dr. Austin, TX 78727		Amount of contribution (\$) \$40.00	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: 17/26 Report: 19/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/03/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Drew (Mr.) 6 Contributor address; City; State; Zip Code 1402 Arcadia Ave Austin, TX 78757	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 05/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montague, Don (Mr.) Contributor address; City; State; Zip Code P.O. Box 216 Driftwood, TX 78619	Amount of contribution (\$) \$40.00	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 05/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moorhead, Robert (Mr.) Contributor address; City; State; Zip Code 4300 Rosedale Austin, TX 78756	Amount of contribution (\$) \$75.00	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 05/10/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Susan (Ms.) Contributor address; City; State; Zip Code 4205 Ramsey Ave Austin, TX 78756	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) Lawyer		Employer (See Instructions) Fowler Law Firm	
Date 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrow, Donna (Ms.) Contributor address; City; State; Zip Code 504 Terrace Dr Austin, TX 78704	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 18/26 Report: 20/44	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Brien, Tia (Ms.) 6 Contributor address; City; State; Zip Code 6 McAllister Ave Kentfield, CA 94904		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 05/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Connor, Deirdre (Ms.) Contributor address; City; State; Zip Code 1213 Newning 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) Housewife			Employer (See Instructions) Self	
Date 05/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Overton, Linda (Ms.) Contributor address; City; State; Zip Code 801 West Gibson 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)			Employer (See Instructions)	
Date 05/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Overton, Linda (Ms.) Contributor address; City; State; Zip Code 801 West Gibson Austin, TX 78704		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 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perkins, Jerry (Mr.) Contributor address; City; State; Zip Code 4128 Lawless 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)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 19/26 Report: 21/44	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/10/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Kenneth (Mr.) 6 Contributor address; City; State; Zip Code 405 21st St SW Minot, ND 58701		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 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phelps, MaryAnne (Ms.) Contributor address; City; State; Zip Code 1503 Haskell St Austin, TX 78702		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 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Powell, GW (Mr.) Contributor address; City; State; Zip Code 4407 Ave H Austin, TX 78751		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 05/09/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reilly, Bruce (Mr.) Contributor address; City; State; Zip Code 2605 Pegram Ave Austin, TX 78757		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) Sustaining Engineer Senior Manager			Employer (See Instructions) Buffalo Technology (USA), Inc.	
Date 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reveles, Lauro (Ms.) Contributor address; City; State; Zip Code 400 Radam Ln Austin, TX 78745		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: 20/26 Report: 22/44

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date 5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Reveles, Lauro (Ms.)

05/29/2012

6 Contributor address; City; State; Zip Code
400 Radam Ln
Austin, TX 78745

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reyes, Cora (Ms.)

05/23/2012

Contributor address; City; State; Zip Code
1109 Space Ln
Austin, TX 78758

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reyes, Joe (Mr.)

05/23/2012

Contributor address; City; State; Zip Code
1109 Space Ln
Austin, TX 78758

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Richter, Dorothy (Ms.)

05/29/2012

Contributor address; City; State; Zip Code
3901 Avenue G
Austin, TX 78751

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rivers, Irene (Ms.)

05/08/2012

Contributor address; City; State; Zip Code
600 Battle Bend Blvd
Austin, TX 78745

Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)

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

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: 21/26 Report: 23/44

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

05/04/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Robinson, Edward (Mr.)

6 Contributor address; City; State; Zip Code
4400 Ramsey Ave
Austin, TX 78756

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)

10 Employer (See Instructions)

Date

05/16/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ross, Lauren (Ms.)

Contributor address; City; State; Zip Code
1405 Hillmont
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Glenrose Engineering

Date

05/05/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rothe, Gail (Ms.)

Contributor address; City; State; Zip Code
1705 Margaret St
Austin, TX 78704

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

05/23/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ruffing, Therese (Ms.)

Contributor address; City; State; Zip Code
5512 Oakwood Cove #181
Austin, TX 78731

Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sanders, Susan (Ms.)

Contributor address; City; State; Zip Code
2910 Hatley Dr
Austin, TX 78746

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

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: 22/26 Report: 24/44	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/08/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schmidli, Lisette (Ms.) 6 Contributor address; City; State; Zip Code 3656 Ranch Creek Dr Austin, TX 78730		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 05/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schneider, Robin (Ms.) Contributor address; City; State; Zip Code 2609 Sherwood Lane Austin, TX 78704		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) Political Organizer			Employer (See Instructions) Texas Campaign for the Environment	
Date 05/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shea, Raymond (Mr.) Contributor address; City; State; Zip Code 7608 Gault St Austin, TX 78757		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 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sittler, Wolf (Mr.) Contributor address; City; State; Zip Code 1403 Kenwood Ave. 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)			Employer (See Instructions)	
Date 05/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Sarah (Ms.) Contributor address; City; State; Zip Code 5012 Woodview Ave 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)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 23/26 Report: 25/44	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/05/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sprinkle, Patty (Ms.)		7 Amount of contribution (\$) \$150.00		8 In-kind contribution description (if applicable)
		6 Contributor address; City; State; Zip Code 1114 Fieldcrest Dr Austin, TX 78704			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sternberg, Bruce (Mr.)		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 16807 South Ridge Lane Austin, TX 78734			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Strand, Christopher (Mr.)		Amount of contribution (\$) \$150.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 6503 Delmonico Dr Austin, TX 78759			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/23/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sussman, Soll (Mr.)		Amount of contribution (\$) \$30.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 6117 Mountain Villa Cove Austin, TX 78731			
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tepfer, Tav (Mr.)		Amount of contribution (\$) \$40.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 919 E 53rd St Austin, TX 78751			
			(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: 24/26 Report: 26/44	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/09/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Helen (Ms.) 6 Contributor address; City; State; Zip Code 2304 Tower 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)			10 Employer (See Instructions)	
Date 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tjepkema, Tamara (Ms.) Contributor address; City; State; Zip Code 8601 Oakmountain Circle Austin, TX 78759		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)			Employer (See Instructions)	
Date 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, David (Mr.) Contributor address; City; State; Zip Code 1304 Mariposa Dr #211 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 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tschurr, Betsy (Ms.) Contributor address; City; State; Zip Code 3701 River Road Austin, TX 78703		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 05/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tschurr, Mark (Mr.) Contributor address; City; State; Zip Code 3701 River Road Austin, TX 78703		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: 25/26 Report: 27/44	
2 FILER NAME <i>Shea, Brigid (Ms.)</i>		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/11/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Umphress, Robert (Mr.) 6 Contributor address; City; State; Zip Code 10194 Vistadale Dr Dallas, TX 75238	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 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valentine, Doryne (Ms.) Contributor address; City; State; Zip Code 4306 Kilgore Ln Austin, TX 78727	Amount of contribution (\$) \$75.00	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 05/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Rooyan, Gary (Mr.) Contributor address; City; State; Zip Code 6154 Piping Rock Ln Houston, TX 77057	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) Special Legal Counsel		Employer (See Instructions) Liquide Environmental Solutions	
Date 05/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendler, Ed (Mr.) Contributor address; City; State; Zip Code 4803 Balcones 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) Real Estate Developer		Employer (See Instructions) EW Development Co	
Date 05/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Werbner, Stuart (Mr.) Contributor address; City; State; Zip Code 2118 Glendale Pl Austin, TX 78704	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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/26 Report: 28/44	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 05/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Westbrook, Jay (Mr.) 6 Contributor address; City; State; Zip Code 4707 Balcones Dr Austin, TX 78731	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) Professor		10 Employer (See Instructions) UT Austin	
Date 05/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wofford, D.J. (Mrs.) Contributor address; City; State; Zip Code 1701 Duke Ave 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)		Employer (See Instructions)	
Date 06/24/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Worley, John (Mr.) Contributor address; City; State; Zip Code 4106 Avenue A 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)		Employer (See Instructions)	
Date 06/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zarker, Ken (Mr.) Contributor address; City; State; Zip Code 1702 Eskridge Blvd SE Olympia, WA 98501	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 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: 1/15 Report: 29/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/11/2012	5 Payee name CiCi's Pizza				
6 Amount (\$) \$46.48	7 Payee address City: State: Zip Code 2525 W Anderson Ln Bldg 3 Ste 132 Austin, TX 78757				
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"/> Dinner for Office Workers		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/03/2012	Payee name City of Austin Utilities				
Amount (\$) \$442.45	Payee address City: State: Zip Code P.O. Box 2267 Austin, TX 78783				
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"/> Campaign Office Utilities		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/23/2012	Payee name City of Austin Utilities				
Amount (\$) \$456.68	Payee address City: State: Zip Code P.O. Box 2267 Austin, TX 78783				
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"/> Campaign Office Utilities		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/09/2012	Payee name Constant Contact				
Amount (\$) \$58.63	Payee address City: State: Zip Code 1601 Trapelo Road Waltham, MA 02451				
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"/> Automated Marketing		
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: 2/15 Report: 30/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 06/09/2012	5 Payee name Constant Contact				
6 Amount (\$) \$5.33	7 Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
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"/> Automated Marketing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/11/2012	Payee name Crestview Minimax				
Amount (\$) \$5.75	Payee address City; State; Zip Code 7108 Woodrow Ave Austin, TX 78757				
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 Office Workers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/03/2012	Payee name Crook, Vanessa (Ms.)				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/23/2012	Payee name Crook, Vanessa (Ms.)				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 2109 Haskell St. Austin, TX 78702				
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"/> Salary		
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: 3/15 Report: 31/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/14/2012	5 Payee name Curry, Michael (Mr.)				
6 Amount (\$) \$50.00	7 Payee address City; State; Zip Code 211 E 7th St Ste 920 Austin, TX 78701				
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"/> Donation Refund		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/11/2012	Payee name Discount Electronics				
Amount (\$) \$8.12	Payee address City; State; Zip Code 1011 W Anderson Ln Austin, TX 78757				
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"/> Office Supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/03/2012	Payee name Dominguez, Gabriela (Ms.)				
Amount (\$) \$50.00	Payee address City; State; Zip Code 2212 Pearl Street Austin, TX 78705				
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"/> Photography Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/17/2012	Payee name Facebook				
Amount (\$) \$20.33	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"/> Political Advertising		
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: 4/15 Report: 32/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/23/2012	5 Payee name Facebook				
6 Amount (\$) \$3.13	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"/> Political Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/11/2012	Payee name Grande Communications				
Amount (\$) \$131.86	Payee address City; State; Zip Code 1923 E. 7th St STE 100 Austin, TX 78702				
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"/> Phone/Internet Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/10/2012	Payee name Harden, Ada (Ms.)				
Amount (\$) \$250.00	Payee address City; State; Zip Code 1700 Meander Drive Austin, TX 78721				
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"/> Consulting Services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/04/2012	Payee name HEB				
Amount (\$) \$32.58	Payee address City; State; Zip Code 5808 Burnet Rd Austin, TX 78756				
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"/> Beverages for Office Workers		
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: 5/15 Report: 33/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
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4 Date 05/12/2012	5 Payee name HEB				
6 Amount (\$) \$47.30	7 Payee address City; State; Zip Code 5808 Burnet Rd Austin, TX 78756				
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"/> Drinks for Office volunteers		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 05/12/2012	Payee name HEB				
Amount (\$) \$13.20	Payee address City; State; Zip Code 5808 Burnet Rd Austin, TX 78756				
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"/> Ice, Stamps for Office		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 05/03/2012	Payee name JPMorgan Chase Bank, N.A.				
Amount (\$) \$34.00	Payee address City; State; Zip Code 7600 Burnet Road Austin, TX 78757				
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"/> Bank Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 05/07/2012	Payee name JPMorgan Chase Bank, N.A.				
Amount (\$) \$30.00	Payee address City; State; Zip Code 7600 Burnet Road Austin, TX 78757				
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"/> Wire Transfer Fee		
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: 6/15 Report: 34/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/14/2012		5 Payee name Little Deli			
6 Amount (\$) \$45.73		7 Payee address City; State; Zip Code 7101-A Woodrow Ave. Austin, TX 78757			
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"/> Lunch for Campaign Workers	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/11/2012		Payee name Lowe's			
Amount (\$) \$128.86		Payee address City; State; Zip Code 8000 Shoal Creek Blvd. Austin, TX 78757			
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"/> Supplies for Signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/07/2012		Payee name M.J. Ross Group, Inc.			
Amount (\$) \$102.85		Payee address City; State; Zip Code P.O. Box 19037 Portland, OR 97280			
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"/> Automated Marketing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/10/2012		Payee name M.J. Ross Group, Inc.			
Amount (\$) \$3,000.00		Payee address City; State; Zip Code P.O. Box 19037 Portland, OR 97280			
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"/> Automated Marketing	
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: 7/15 Report: 35/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/15/2012	5 Payee name M.J. Ross Group, Inc.				
6 Amount (\$) \$2,969.79	7 Payee address City; State; Zip Code P.O. Box 19037 Portland, OR 97280				
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"/> Automated Marketing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/03/2012	Payee name McNally, John (Mr.)				
Amount (\$) \$1,600.00	Payee address City; State; Zip Code 3002 Breeze Terrace Austin, TX 78722				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/23/2012	Payee name McNally, John (Mr.)				
Amount (\$) \$1,600.00	Payee address City; State; Zip Code 3002 Breeze Terrace Austin, TX 78722				
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"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/03/2012	Payee name Mexitas				
Amount (\$) \$450.00	Payee address City; State; Zip Code 1107 N IH35 Austin, TX 78702				
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"/> Watch Party Event Rental		
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: 8/15 Report: 36/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/04/2012		5 Payee name Office Depot			
6 Amount (\$) \$88.57		7 Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757			
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"/> Printing/Copying Services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/04/2012		Payee name Office Depot			
Amount (\$) \$85.51		Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757			
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"/> Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/05/2012		Payee name Office Depot			
Amount (\$) \$180.00		Payee address City; State; Zip Code 2102 South Lamar Austin, TX 78704			
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"/> Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/05/2012		Payee name Office Depot			
Amount (\$) \$70.63		Payee address City; State; Zip Code 2102 South Lamar Austin, TX 78704			
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"/> Print Services	
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: 9/15 Report: 37/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
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4 Date 05/11/2012	5 Payee name Office Depot				
6 Amount (\$) \$50.20	7 Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Printer Ink		
	<div style="display: flex; justify-content: space-between;"> 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: </div>				

Date 05/14/2012	Payee name Office Depot				
Amount (\$) \$47.63	Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757				
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"/> Postage, Labels		
	<div style="display: flex; justify-content: space-between;"> Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: </div>				

Date 05/15/2012	Payee name Office Depot				
Amount (\$) \$92.16	Payee address City; State; Zip Code 2102 South 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"/> Copy Services		
	<div style="display: flex; justify-content: space-between;"> Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: </div>				

Date 05/18/2012	Payee name Office Depot				
Amount (\$) \$306.00	Payee address City; State; Zip Code 2620 W Anderson Lane Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps/Postage		
	<div style="display: flex; justify-content: space-between;"> Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: </div>				

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: 10/15 Report: 38/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000
4 Date 05/23/2012	5 Payee name Oliver, Bill (Mr.)			
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code 2728 S Congress #12 Austin, TX 78704			
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"/> Musician Services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/12/2012	Payee name Papa Johns			
Amount (\$) \$50.47	Payee address City; State; Zip Code 5343 Burnet Rd Austin, TX 78756			
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"/> Lunch for Office Workers	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 06/30/2012	Payee name Paypal			
Amount (\$) \$127.82	Payee address City; State; Zip Code 2145 Hamilton Avenue San Jose, CA 95125			
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"/> Cumulative credit card processing fees for reporting period	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/23/2012	Payee name Pogue, Alan (Mr.)			
Amount (\$) \$200.00	Payee address City; State; Zip Code 2104 East Martin Luther King, Jr. Blvd Austin, TX 78702			
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"/> Photographic Services	
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: 11/15 Report: 39/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/03/2012		5 Payee name Raab, Angela Melina (Ms.)			
6 Amount (\$) \$500.00		7 Payee address City; State; Zip Code 2606 Pegram Ave Austin, TX 78757			
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"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/03/2012		Payee name Rindy & Associates, Inc.			
Amount (\$) \$124.24		Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702			
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"/> Political Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/07/2012		Payee name Rindy & Associates, Inc.			
Amount (\$) \$60,000.00		Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702			
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"/> Political Advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/07/2012		Payee name Rindy & Associates, Inc.			
Amount (\$) \$9,500.00		Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702			
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"/> Political Advertising	
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: 12/15 Report: 40/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/08/2012		5 Payee name Rindy & Associates, Inc.			
6 Amount (\$) \$351.81		7 Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702			
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"/> Political Advertising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/29/2012		Payee name Shea, Brigid (Ms.)			
Amount (\$) \$2,500.00		Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Partial Loan Repayment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/30/2012		Payee name Square			
Amount (\$) \$31.83		Payee address City; State; Zip Code 110 5th Street San Francisco, CA 94103			
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"/> Cumulative credit card processing fees for reporting period	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/04/2012		Payee name The Austin Chronicle			
Amount (\$) \$1,345.00		Payee address City; State; Zip Code P.O. Box 49066 Austin, TX 78765			
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"/> Political Advertising	
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: 13/15 Report: 41/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/11/2012	5 Payee name The Austin Chronicle				
6 Amount (\$) \$1,845.00	7 Payee address City: State: Zip Code P.O. Box 49066 Austin, TX 78765				
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"/> Political Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/17/2012	Payee name The Frisco Shop				
Amount (\$) \$18.44	Payee address City: State: Zip Code 6801 Burnet Rd Austin, TX 78757				
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"/> Lunch for Office Workers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/11/2012	Payee name Thunderbird Coffee				
Amount (\$) \$23.50	Payee address City: State: Zip Code 1401 Koenig Ln Austin, TX 78756				
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"/> Beverages for Campaign Staff		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/03/2012	Payee name United States Postal Service Northcross Station				
Amount (\$) \$135.00	Payee address City: State: Zip Code 7700 Northcross Dr Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps		
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: 14/15 Report: 42/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/04/2012		5 Payee name United States Postal Service Northcross Station			
6 Amount (\$) \$360.00		7 Payee address City; State; Zip Code 7700 Northcross Dr Austin, TX 78757			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/07/2012		Payee name United States Postal Service Northcross Station			
Amount (\$) \$180.00		Payee address City; State; Zip Code 7700 Northcross Dr Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/06/2012		Payee name United States Postal Service South Congress Station			
Amount (\$) \$16.20		Payee address City; State; Zip Code 3903 S Congress Ave Austin, TX 78704			
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"/> Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/06/2012		Payee name United States Postal Service South Congress Station			
Amount (\$) \$16.20		Payee address City; State; Zip Code 3903 S Congress Ave Austin, TX 78704			
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"/> Stamps	
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: 15/15 Report: 43/44		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 05/03/2012		5 Payee name Worley Printing Co., Inc.			
6 Amount (\$) \$3,258.33		7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
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"/> Yard Signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/03/2012		Payee name Worley Printing Co., Inc.			
Amount (\$) \$926.62		Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
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"/> Doorhangers	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/11/2012		Payee name Worley Printing Co., Inc.			
Amount (\$) \$356.03		Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
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"/> Posters	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/07/2012		Payee name yousendit			
Amount (\$) \$9.99		Payee address City; State; Zip Code 1919 S Bascom Ave 3rd Floor Campbell, CA 95008			
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"/> File Sharing Subscription Service	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

**INTEREST EARNED, OTHER CREDITS/GAINS/
REFUNDS, AND PURCHASE OF INVESTMENTS****SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 44/44
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000
4 Date 06/30/2012	5 Name of person from whom amount is received JPMorgan Chase Bank, N.A. 6 Address of person from whom amount is received; City; State; Zip Code 7600 Burnet Road Austin, TX 78757 7 Purpose for which amount is received Interest on Checking Account	8 Amount (\$) \$0.46
Date 05/18/2012	Name of person from whom amount is received Texas Office Products & Supply Address of person from whom amount is received; City; State; Zip Code 4103 N IH35 Austin, TX 78722 Purpose for which amount is received Refund for Office Furniture	Amount (\$) \$1,400.00

VERIFICATION FOR ELECTRONIC FILING

AFFIDAVIT

I, Brigid Shea, swear or affirm, that the accompanying report filed on electronic disk is true and correct and includes all information required to be reported by me under Title 15, Election Code.

7/16/12
Date

Brigid Shea
Signature - Candidate or Officeholder

Sworn to and subscribed before me, by the said Brigid Shea,
this the 16th day of July, 2012, to certify which, witness
my hand and seal.

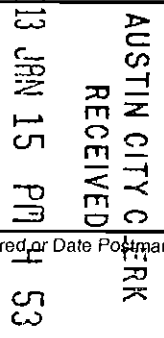
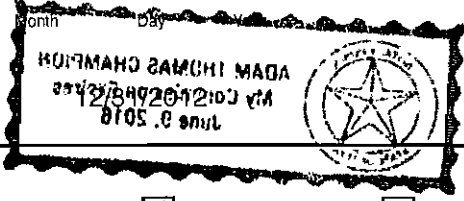


SEAL

[Signature]
Signature - officer administering oath

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) 00006000	2 PAGE # 1 of 49
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Brigid		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Shea		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2604 Geraghty Ave. Austin, TX 78757		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Danette		
	NICKNAME LAST SUFFIX Chimenti		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 200 The Circle Austin, TX 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 912-8290		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year 07/01/2012 THROUGH 		
10 ELECTION	ELECTION DATE Month Day Year 05/12/2012	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Mayor	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Shea, Brigid (Ms.)**14 ACCOUNT #** (Ethics Commission filers)
00006000**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

\$ 197.00

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

\$ 18,000.00

**EXPENDITURE
TOTALS**

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

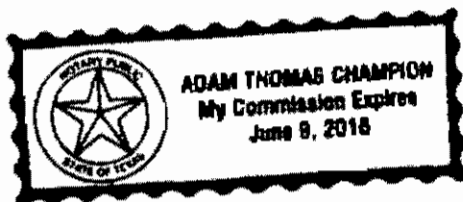
\$ 19,898.35

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

\$ 265.01

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

\$ 44,340.00

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.

Brigid Shea
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brigid Shea, this the 15 day
of JAN, 2013, to certify which, witness my hand and seal of office.

Adam Thomas Champion
Signature of officer administering oath

Adam Thomas Champion
Print name of officer administering oath

PB-SBS
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: 1/40 Report: 3/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

07/14/2012

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

Abbot, Stephen (Mr.)

6 Contributor address; City; State; Zip Code

2703 Bonnie Rd
Austin, TX 78703

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

Programmer

10 Employer (See Instructions)

IBM

Date

11/04/2012

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

Ahern, Linda (Ms.)

Contributor address; City; State; Zip Code

302 Park Ln
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

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

Aika, Suvi (Ms.)

Contributor address; City; State; Zip Code

1507 Treadwell St
Austin, TX 78704

Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

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

Aleshire, Bill (Mr.)

Contributor address; City; State; Zip Code

3605 Shady Valley Dr
Austin, TX 78739

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Riggs, Aleshire & Ray PC

Date

08/01/2012

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

Arnold, Mary (Ms.)

Contributor address; City; State; Zip Code

3404 Southhill Circle
Austin, TX 78703

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

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: 2/40 Report: 4/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/13/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Atherton, Lorraine (Ms.)

6 Contributor address; City; State; Zip Code
2009 Arpdale
Austin, TX 78704

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)
Copy Editor

10 Employer (See Instructions)
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bailey, Brooke (Ms.)

11/01/2012

Contributor address; City; State; Zip Code
1801 West 10th St
Austin, TX 78703

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Baker, Harris (Mr.)

11/03/2012

Contributor address; City; State; Zip Code
5000 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) ☐

Principal occupation / Job title (See Instructions)
Alternative Energy

Employer (See Instructions)
HBH Operations

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Baker, Roger (Mr.)

07/14/2012

Contributor address; City; State; Zip Code
1303 Bentwood
Austin, TX 78722

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Investor

Employer (See Instructions)
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Baker, Roger (Mr.)

11/04/2012

Contributor address; City; State; Zip Code
1303 Bentwood
Austin, TX 78722

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Investor

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/40 Report: 5/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/03/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Barbaro, Niccolo (Mr.)

6 Contributor address; City; State; Zip Code
4112 Speedway
Austin, TX 78751

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Publisher

10 Employer (See Instructions)
Austin Chronicle

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Barber, Donna (Ms.)

07/09/2012

Contributor address; City; State; Zip Code
1502 Madison Ave
Austin, TX 78757

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)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Barry, Claire (Ms.)

11/04/2012

Contributor address; City; State; Zip Code
1505 Brentwood
Austin, TX 78757

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bauer, Steve (Mr.)

07/14/2012

Contributor address; City; State; Zip Code
4813 Canyonbend Cir
Austin, TX 78735

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)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Betancourt, Carl (Mr.)

07/14/2012

Contributor address; City; State; Zip Code
1505 Travis Hts Blvd
Austin, TX 78704

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Sheet Metal Worker

Employer (See Instructions)
Dynamic Systems Inc

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/40 Report: 6/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

11/01/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Blinn, John (Mr.)

6 Contributor address; City; State; Zip Code
5512 Oakwood Cove #181
Austin, TX 78731

7 Amount of contribution (\$)

\$20.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Blizzard, Michael (Mr.)

11/11/2012

Contributor address; City; State; Zip Code
2100 Southern Oaks
Austin, TX 78745

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Boyt, Jeff (Mr.)

08/30/2012

Contributor address; City; State; Zip Code
5423 Shoalwood
Austin, TX 78756

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brodnax, Pat (Ms.)

11/01/2012

Contributor address; City; State; Zip Code
1105 West Annie
Austin, TX 78704

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown, Maurya (Ms.)

07/13/2012

Contributor address; City; State; Zip Code
20 Chestnut Hill Road
Trumbull, CT 06611

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)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/40 Report: 7/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Bunch, Bill (Mr.)7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

07/14/2012

6 Contributor address; City; State; Zip Code
1307 Oxford Ave
Austin, TX 78704

\$200.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Attorney10 Employer (See Instructions)
SOS Alliance

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bunch, Bill (Mr.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

11/04/2012

Contributor address; City; State; Zip Code
1307 Oxford Ave
Austin, TX 78704

\$100.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
SOS Alliance

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Burton, Scott (Mr.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
4509 Sinclair Ave
Austin, TX 78756

\$20.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Butler, Joy (Ms.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

10/29/2012

Contributor address; City; State; Zip Code
2028 Emma Long St
Austin, TX 78723

\$200.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
HomemakerEmployer (See Instructions)
N/A

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Carbone, Kata (Ms.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/05/2012

Contributor address; City; State; Zip Code
2710 West 49th 1/2 St
Austin, TX 78731

\$100.00

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

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: 6/40 Report: 8/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 11/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carbone, Kata (Ms.) 6 Contributor address; City; State; Zip Code 2710 West 49th 1/2 St Austin, TX 78731	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)		10 Employer (See Instructions)	
Date 07/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chimenti, Danette (Ms.) Contributor address; City; State; Zip Code 200 The Circle Austin, TX 78704	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) Computer Consultant		Employer (See Instructions) Self	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chimenti, Danette (Ms.) Contributor address; City; State; Zip Code 200 The Circle Austin, TX 78704	Amount of contribution (\$) \$340.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Computer Consultant		Employer (See Instructions) Self	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Pamela (Ms.) Contributor address; City; State; Zip Code 4100 Bluffridge Dr Austin, TX 78759	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 07/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clarke, Margot (Ms.) Contributor address; City; State; Zip Code 5106 Evergreen Ct. Austin, TX 78731	Amount of contribution (\$) \$40.00	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: 7/40 Report: 9/49	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clayton, Nan (Ms.) 6 Contributor address; City; State; Zip Code 2909 Oaklane Dr Austin, TX 78704		7 Amount of contribution (\$) \$40.00	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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clements, Amy (Ms.) Contributor address; City; State; Zip Code 1735 Spyglass Dr #113 Austin, TX 78746		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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clements, Andrew (Mr.) Contributor address; City; State; Zip Code 1735 Spyglass Dr #113 Austin, TX 78746		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 11/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, George (Mr.) Contributor address; City; State; Zip Code 3306 Gentry Dr Austin, TX 78746		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 08/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, Mary (Ms.) Contributor address; City; State; Zip Code 3306 Gentry Austin, TX 78746		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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/40 Report: 10/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 11/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, Rick (Mr.) 6 Contributor address; City; State; Zip Code 1611 W 5th St #232 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)		10 Employer (See Instructions)	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cronk, Tom (Mr.) Contributor address; City; State; Zip Code 2406 Westover Rd Austin, TX 78703	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) Marketing Director		Employer (See Instructions) Community Techknowledge Inc.	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cronk, Tom (Mr.) Contributor address; City; State; Zip Code 2406 Westover Rd Austin, TX 78703	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) Marketing Director		Employer (See Instructions) Community Techknowledge Inc.	
Date 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curtis, Linda (Ms.) Contributor address; City; State; Zip Code 150 S Shore Rd Austin, TX 78702	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)		Employer (See Instructions)	
Date 07/09/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Czajkowski, Ronald (Mr.) Contributor address; City; State; Zip Code 1707 Spyglass Dr #77 Austin, TX 78746	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) Civil Engineer		Employer (See Instructions) City of Austin	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 9/40 Report: 11/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/14/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
DeYoung, Claire (Ms.)

6 Contributor address; City; State; Zip Code
P.O. Box 684236
Austin, TX 78768

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)
Retired

10 Employer (See Instructions)
N/A

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dietrich, Jerry (Mr.)

Contributor address; City; State; Zip Code
8580 Woodway #2402
Houston, TX 77063

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dolis, George (Mr.)

Contributor address; City; State; Zip Code
704 W Gibson St.
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

11/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dolis, George (Mr.)

Contributor address; City; State; Zip Code
704 W Gibson St.
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

07/13/2012

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

Contributor address; City; State; Zip Code
360 Nueces St #2701
Austin, TX 78701

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
City Planner

Employer (See Instructions)
Duncan Associates

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/40 Report: 12/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Katherine (Ms.) 6 Contributor address; City; State; Zip Code 360 Nueces St #2701 Austin, TX 78701	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) Housewife		10 Employer (See Instructions) None	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Echols, Catharine (Ms.) Contributor address; City; State; Zip Code 508 Harris Ave Austin, TX 78705	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 11/01/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eckhardt, Sarah (Ms.) Contributor address; City; State; Zip Code 1001 Lorrain St Austin, TX 78703	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) Lawyer		Employer (See Instructions) Travis County	
Date 07/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellison, Christopher (Mr.) Contributor address; City; State; Zip Code 2500 Flora Cove 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) Professor		Employer (See Instructions) UT San Antonio	
Date 10/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Feazell, Vic (Mr.) Contributor address; City; State; Zip Code 8127 Mesa 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) Attorney		Employer (See Instructions) Self	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 11/40 Report: 13/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

07/13/2012

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

Ferchill, Cary (Mr.)

6 Contributor address; City; State; Zip Code
2524 Tanglewood Trail
Austin, TX 78703

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Lawyer

10 Employer (See Instructions)
Self

Date

08/01/2012

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

Foster, David (Mr.)

Contributor address; City; State; Zip Code
1902 Forestglade Dr
Austin, TX 78745

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/04/2012

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

Foster, Virginia (Ms.)

Contributor address; City; State; Zip Code
1902 Forestglade Dr
Austin, TX 78745

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

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

Gage, Winnie (Ms.)

Contributor address; City; State; Zip Code
705 Windsong Trail
Austin, TX 78746

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/05/2012

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

Gage, Winnie (Ms.)

Contributor address; City; State; Zip Code
705 Windsong Trail
Austin, TX 78746

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

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

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: 12/40 Report: 14/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/16/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geiger, Carol (Ms.) 6 Contributor address; City; State; Zip Code 2613 Nottingham Ln 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) Office Manager		10 Employer (See Instructions) Public Citizen	
Date 11/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geiger, Carol (Ms.) Contributor address; City; State; Zip Code 2613 Nottingham Ln 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) Office Manager		Employer (See Instructions) Public Citizen	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbons, Robert (Mr.) Contributor address; City; State; Zip Code 613 Hearn St Austin, TX 78703	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 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbons, Robert (Mr.) Contributor address; City; State; Zip Code 613 Hearn St 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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibbs, Carol (Ms.) Contributor address; City; State; Zip Code 1602 Roberts Ave 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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/40 Report: 15/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goff, Gayle (Ms.) 6 Contributor address; City; State; Zip Code 1106 Upland Austin, TX 78741	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 11/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, William (Mr.) Contributor address; City; State; Zip Code 6103 Cary Dr Austin, TX 78757	Amount of contribution (\$) \$80.00	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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Ann (Ms.) Contributor address; City; State; Zip Code 3815 Avenue H Austin, TX 78751	Amount of contribution (\$) \$40.00	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 10/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenberg, Joel (Mr.) Contributor address; City; State; Zip Code 6806 Daugherty Austin, TX 78757	Amount of contribution (\$) \$1.00	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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerrero, Linda (Ms.) Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705	Amount of contribution (\$) \$40.00	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: 14/40 Report: 16/49	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 11/01/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerrero, Linda (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705		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 07/26/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hadden, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code 605 Carismatic Ln Austin, TX 78746		Amount of contribution (\$) \$40.00	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 11/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hadden, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code 605 Carismatic Ln Austin, TX 78746		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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hagey, Donna (Ms.) <hr/> Contributor address; City; State; Zip Code 3906 Cherrywood Austin, TX 78722		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 07/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hansen, Yvonne (Ms.) <hr/> Contributor address; City; State; Zip Code 6206 Hillston Dr Austin, TX 78745		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: 15/40 Report: 17/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/14/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Harkey, Beverley (Ms.)

6 Contributor address; City; State; Zip Code
2601 Albata Ave
Austin, TX 78757

7 Amount of
contribution (\$)

\$40.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/18/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Heinen, Anne (Ms.)

Contributor address; City; State; Zip Code
3010 Washington Square
Austin, TX 78705

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/12/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hersh, Matt (Mr.)

Contributor address; City; State; Zip Code
1409 Gorham
Austin, TX 78758

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

07/20/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Herzele, Charlotte (Ms.)

Contributor address; City; State; Zip Code
3916 Ave H
Austin, TX 78751

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Lecturer

Employer (See Instructions)
UT Austin

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hetrick, Kathleen (Ms.)

Contributor address; City; State; Zip Code
4406 B Bennett Ave
Austin, TX 78751

Amount of
contribution (\$)

\$7.00

In-kind contribution
description (if applicable)

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

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: 16/40 Report: 18/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 11/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hetrick, Kathleen (Ms.) 6 Contributor address; City; State; Zip Code 4406 B Bennett Ave Austin, TX 78751	7 Amount of contribution (\$) \$10.00	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 08/03/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hirsch, Mike (Mr.) Contributor address; City; State; Zip Code 1600 Texas Ave 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 09/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hohengarten, Nancy (Ms.) Contributor address; City; State; Zip Code 4114 Avenue H Austin, TX 78751	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 07/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holderness, Earl (Mr.) Contributor address; City; State; Zip Code 2943 Thousand Oaks Dr Austin, TX 78746	Amount of contribution (\$) \$75.00	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 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holderness, Earl (Mr.) Contributor address; City; State; Zip Code 2943 Thousand Oaks Dr Austin, TX 78746	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) 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: 17/40 Report: 19/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

07/20/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Holderness, Macy (Ms.)

6 Contributor address; City; State; Zip Code
2943 Thousand Oaks Dr
Austin, TX 78746

7 Amount of
contribution (\$)

\$75.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
N/A

Date

11/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Holderness, Macy (Ms.)

Contributor address; City; State; Zip Code
2943 Thousand Oaks Dr
Austin, TX 78746

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

11/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Howie, VelAnne (Ms.)

Contributor address; City; State; Zip Code
604 North Llano
Fredericksburg, TX 78624

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Huber, Karen (Ms.)

Contributor address; City; State; Zip Code
23020 Pedernales Canyon Trl
Spicewood, TX 78669

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hunsaker, Merle (Ms.)

Contributor address; City; State; Zip Code
8580 Woodway
Houston, TX 77063

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

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: 18/40 Report: 20/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

11/04/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hyatt, Diane (Ms.)

6 Contributor address; City; State; Zip Code
400 North Lowell Lane
Austin, TX 78733

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)
Engineer

10 Employer (See Instructions)
Texas Water Development Board

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Isgur, Lea (Ms.)

07/14/2012

Contributor address; City; State; Zip Code
1504 Madison Ave
Austin, TX 78757

Amount of contribution (\$)

\$30.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Iverson, Richard (Mr.)

07/16/2012

Contributor address; City; State; Zip Code
506 W 34th St
Austin, TX 78705

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jack, Jeff (Mr.)

07/05/2012

Contributor address; City; State; Zip Code
2008 B Rabb Glen Rd
Austin, TX 78704

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jack, Jeff (Mr.)

11/04/2012

Contributor address; City; State; Zip Code
2008 B Rabb Glen Rd
Austin, TX 78704

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

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: 19/40 Report: 21/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/06/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jackson, Charlie (Mr.)

6 Contributor address; City; State; Zip Code
11900 Metric Blvd
Austin, TX 78758

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)
Tech Consultant

10 Employer (See Instructions)
Acceleros

Date

07/09/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kallerman, Dick (Mr.)

Contributor address; City; State; Zip Code
2510 Cedarview Dr
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kallerman, Dick (Mr.)

Contributor address; City; State; Zip Code
2510 Cedarview Dr
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/19/2012

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

Contributor address; City; State; Zip Code
1511 Garnaas Dr
Austin, TX 78758

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/10/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kendall, Joe (Mr.)

Contributor address; City; State; Zip Code
801 West Gibson
Austin, TX 78704

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

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: 20/40 Report: 22/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/12/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Knight, Robert (Mr.)

6 Contributor address; City; State; Zip Code
307 East 2nd
Austin, TX 78701

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Real Estate

10 Employer (See Instructions)
Knight Realty

Date

10/29/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kralj, Elliot (Mr.)

Contributor address; City; State; Zip Code
3809 Gaines Ct
Austin, TX 78735

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kreps, Karen (Ms.)

Contributor address; City; State; Zip Code
1711 Spyglass Dr #229
Austin, TX 78746

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/11/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lehman, Chris (Mr.)

Contributor address; City; State; Zip Code
1914 Larchmont Dr
Austin, TX 78704

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real Estate Appraiser

Employer (See Instructions)
Self

Date

07/15/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Long, Andrew (Mr.)

Contributor address; City; State; Zip Code
2112 Willow St
Austin, TX 78702

Amount of
contribution (\$)

\$30.00

In-kind contribution
description (if applicable)

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

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: 21/40 Report: 23/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Maceo, Peggy (Ms.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

07/14/2012

6 Contributor address; City; State; Zip Code
2601 Ellise Ave
Austin, TX 78757

\$15.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mather, Jean (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
1611 Alameda Dr
Austin, TX 78704

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
McCasin, Marjorie (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
1510 Bellaire Dr
Austin, TX 78741

\$20.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
McFadden, Elliott (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
5118 Meadow Creek Dr
Austin, TX 78745

\$10.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
McGraw, Karen (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
4315 Avenue C
Austin, TX 78751

\$20.00

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

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: 22/40 Report: 24/49	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIntosh, Michael (Mr.) 6 Contributor address; City; State; Zip Code 8303 Polar Dr Austin, TX 78757		7 Amount of contribution (\$) \$30.00	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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNally, John (Mr.) Contributor address; City; State; Zip Code 2031 Peavy Rd Dallas, TX 75228		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 12/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meeker, Jason (Mr.) Contributor address; City; State; Zip Code 6305 Amberly Place Austin, TX 78759		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) Freelance Copywriter			Employer (See Instructions) Self		
Date 07/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meier, Michael (Mr.) Contributor address; City; State; Zip Code 2009 Arpdale 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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melder, Bobbie (Ms.) Contributor address; City; State; Zip Code 805 Battle Bend Blvd Austin, TX 78745		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: 23/40 Report: 25/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Meleski, Bruce (Mr.)7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

07/14/2012

6 Contributor address; City; State; Zip Code
2107 Apricot Circle Dr
Austin, TX 78746

\$30.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Milam, Mary (Ms.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/05/2012

Contributor address; City; State; Zip Code
1211 Quail Park Dr.
Austin, TX 78758

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mock, Jeff (Mr.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
11609 Big Trail
Austin, TX 78759

\$10.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Moffat, Susan (Ms.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/03/2012

Contributor address; City; State; Zip Code
4112 Speedway
Austin, TX 78751

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Researcher/WriterEmployer (See Instructions)
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Moffat, Susan (Ms.)Amount of
contribution (\$)In-kind contribution
description (if applicable)

11/02/2012

Contributor address; City; State; Zip Code
4112 Speedway
Austin, TX 78751

\$100.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Researcher/WriterEmployer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/40 Report: 26/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 11/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moody, Carole (Ms.) 6 Contributor address; City; State; Zip Code 2225 Independence Dr Austin, TX 78745	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)		10 Employer (See Instructions)	
Date 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moon, Betsy (Ms.) Contributor address; City; State; Zip Code 1001 Arrowway Tr Austin, TX 78733	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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Catherine (Ms.) Contributor address; City; State; Zip Code 3802 Avenue H 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)		Employer (See Instructions)	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moriarty, William (Mr.) Contributor address; City; State; Zip Code 400 North Lowell Lane Austin, TX 78733	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) King Engineering	
Date 07/02/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Laura (Ms.) Contributor address; City; State; Zip Code 610 Baylor 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) City Council		Employer (See Instructions) City of Austin	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/40 Report: 27/49	
2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Phil (Mr.) 6 Contributor address; City; State; Zip Code 610 Baylor St 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) Professor		10 Employer (See Instructions) UT Austin	
Date 07/08/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Susan (Ms.) Contributor address; City; State; Zip Code 4205 Ramsey Ave Austin, TX 78756	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) Lawyer		Employer (See Instructions) Fowler Law Firm	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nazor, Craig (Mr.) Contributor address; City; State; Zip Code 11701 Barchetta Dr Austin, TX 78758	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) Musician/Professor		Employer (See Instructions) Austin Community College	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oakey, William (Mr.) Contributor address; City; State; Zip Code 1507 B Elton Ln Austin, TX 78703	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 07/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Opyt, Barbara (Ms.) Contributor address; City; State; Zip Code 4610 Ave B Austin, TX 78751	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: 26/40 Report: 28/49	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Opyt, Barbara (Ms.) 6 Contributor address; City; State; Zip Code 4610 Ave B Austin, TX 78751		7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orr, Lisa (Ms.) Contributor address; City; State; Zip Code 1502 Alta Vista Ave Austin, TX 78704		Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Teacher			Employer (See Instructions) St. Stephens	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orr, Lisa (Ms.) Contributor address; City; State; Zip Code 1502 Alta Vista Ave Austin, TX 78704		Amount of contribution (\$) \$180.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Teacher			Employer (See Instructions) St. Stephens	
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orshalick, David (Mr.) Contributor address; City; State; Zip Code 2710 West 49th 1/2 Street Austin, TX 78731		Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 07/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oxford, Denis (Mr.) Contributor address; City; State; Zip Code 6819 Daugherty Austin, TX 78757		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 27/40 Report: 29/49	
2 FILER NAME Shea, Brigid (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/02/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Page, Susan (Ms.) 6 Contributor address; City; State; Zip Code 5704 Jim Hogg Ave. Austin, TX 78756		7 Amount of contribution (\$) \$40.00	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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parham, Amy (Ms.) Contributor address; City; State; Zip Code 226 Witte Blvd Kyle, TX 78640		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 07/05/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peters, Nicholas (Mr.) Contributor address; City; State; Zip Code 3820 Reno Road NW Washington, DC 20008		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 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pipkin, Stan (Mr.) Contributor address; City; State; Zip Code 2100 B Wordsworth Austin, TX 78704		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) Architect			Employer (See Instructions) Lighthouse Solar	
Date 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pipkin, Stan (Mr.) Contributor address; City; State; Zip Code 2100 B Wordsworth Austin, TX 78704		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) Architect			Employer (See Instructions) Lighthouse Solar	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 28/40 Report: 30/49	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filters) 00006000	
4 Date 10/20/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pool, Leslie (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 4503 Shoal Creek Blvd Austin, TX 78756		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 07/12/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Powell, Lisa (Ms.) <hr/> Contributor address; City; State; Zip Code 6114 Janey Dr Austin, TX 78757		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) Rancher			Employer (See Instructions) Self		
Date 07/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richards, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code 500 E Riverside Dr #267 Austin, TX 78704		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) Natures Treasures of Texas		
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richter, Dorothy (Ms.) <hr/> Contributor address; City; State; Zip Code 3901 Avenue G Austin, TX 78751		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 11/07/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richter, Dorothy (Ms.) <hr/> Contributor address; City; State; Zip Code 3901 Avenue G Austin, TX 78751		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)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 29/40 Report: 31/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

11/04/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Rittenhouse, Margaret (Ms.)

6 Contributor address; City; State; Zip Code
915 Ken St
Austin, TX 78758

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)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Robbins, Paul (Mr.)

07/14/2012

Contributor address; City; State; Zip Code
P.O. Box 1374
Austin, TX 78767

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roberts, Stephen (Mr.)

09/04/2012

Contributor address; City; State; Zip Code
11823 Eubank Dr
Austin, TX 78758

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Robinson, Justin (Mr.)

11/04/2012

Contributor address; City; State; Zip Code
4915 Finley Dr
Austin, TX 78731

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)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rodgers, Brian (Mr.)

07/02/2012

Contributor address; City; State; Zip Code
1112 West 9th St
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 30/40 Report: 32/49	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 07/14/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogoff, Regina (Ms.) 6 Contributor address; City; State; Zip Code 1705 Schieffer Austin, TX 78722		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 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenthal, Chip (Mr.) Contributor address; City; State; Zip Code 8313 Franwood Ln 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)			Employer (See Instructions)		
Date 07/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ruiz, Crispin (Ms.) Contributor address; City; State; Zip Code 408 Whitetail Dr. Manchaca, TX 78652		Amount of contribution (\$) \$40.00	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 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Russell, Debbie (Ms.) Contributor address; City; State; Zip Code 2311 Riverside Farms Rd Austin, TX 78741		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)			Employer (See Instructions)		
Date 11/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Russell, Debbie (Ms.) Contributor address; City; State; Zip Code 2311 Riverside Farms Rd Austin, TX 78741		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)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 31/40 Report: 33/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/14/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Sawyer, Peter (Mr.)

6 Contributor address; City; State; Zip Code
3506 Far View Dr
Austin, TX 78730

7 Amount of
contribution (\$)

\$20.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

11/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scanlan, Nancy (Ms.)

Contributor address; City; State; Zip Code
4513 Balcones Dr.
Austin, TX 78731

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)
Retired

Employer (See Instructions)
N/A

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Schneider, Robin (Ms.)

Contributor address; City; State; Zip Code
2609 Sherwood Lane
Austin, TX 78704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Political Organizer

Employer (See Instructions)
Texas Campaign for the Environment

Date

11/04/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Schneider, Robin (Ms.)

Contributor address; City; State; Zip Code
2609 Sherwood Lane
Austin, TX 78704

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)
Political Organizer

Employer (See Instructions)
Texas Campaign for the Environment

Date

07/12/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sedwick, Shannon (Ms.)

Contributor address; City; State; Zip Code
350 King Arthur Court
Austin, TX 78746

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Theatre Owner

Employer (See Instructions)
Esther's Follies

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 32/40 Report: 34/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date
07/14/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Sherwood, Melanie (Ms.)

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

\$50.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Skiera, Gayle (Ms.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$30.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smaha, Stephen (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$20.00

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

Principal occupation / Job title (See Instructions)
Investor

Employer (See Instructions)
Self

Date
07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smith, Bill (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$10.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smith, David (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$20.00

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

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: 33/40 Report: 35/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

07/14/2012

6 Contributor address; City; State; Zip Code
4005 Wrightwood Rd
Austin, TX 78722

\$30.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smith, Tom (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/16/2012

Contributor address; City; State; Zip Code
1801 Westlake Dr #209
Austin, TX 78746

\$60.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Speights, Sara (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/11/2012

Contributor address; City; State; Zip Code
2701 West 49 1/2 St
Austin, TX 78731

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Speir, Stephen (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/13/2012

Contributor address; City; State; Zip Code
1225 Corona Dr
Austin, TX 78723

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Speir, Stephen (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/07/2012

Contributor address; City; State; Zip Code
1225 Corona Dr
Austin, TX 78723

\$30.00

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

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: 34/40 Report: 36/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Spoor, Jerry (Mr.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

11/04/2012

6 Contributor address; City; State; Zip Code
7904 Woodcroft Dr.
Austin, TX 78749

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Spradling, Vicky (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
3004 Clearview Dr
Austin, TX 78703

\$30.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Spradling, Vicky (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/04/2012

Contributor address; City; State; Zip Code
3004 Clearview Dr
Austin, TX 78703

\$20.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Steinhardt, Peter (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

08/01/2012

Contributor address; City; State; Zip Code
4518 Apache Pass
Austin, TX 78745

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sternberg, Ric (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/12/2012

Contributor address; City; State; Zip Code
24815 Hamilton Pool Rd
Round Mountain, TX 78663

\$25.00

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

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: 35/40 Report: 37/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Strecker, Barbara (Ms.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

07/02/2012

6 Contributor address; City; State; Zip Code
6611 Jamaica Ct
Austin, TX 78757

\$20.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sullivan, David (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/30/2012

Contributor address; City; State; Zip Code
1710 Waterston Ave
Austin, TX 78703

\$50.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sussman, Soli (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

11/04/2012

Contributor address; City; State; Zip Code
6117 Mountain Villa Cove
Austin, TX 78731

\$45.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sweeney, Paul (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
1311 Exposition Blvd #6
Austin, TX 78703

\$20.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tassin, Kerey (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code
11609 Big Trail
Austin, TX 78759

\$10.00

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

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: 36/40 Report: 38/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

11/04/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Taylor, Melinda (Ms.)

6 Contributor address; City; State; Zip Code
4209 Camacho St
Austin, TX 78723

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)

10 Employer (See Instructions)

Date

07/12/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tiemann, Donna (Ms.)

Contributor address; City; State; Zip Code
3203 Cupid Dr
Austin, TX 78735

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Council Aide

Employer (See Instructions)
City of Austin

Date

07/02/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tolleson, Mike (Mr.)

Contributor address; City; State; Zip Code
2106 E MLK
Austin, TX 78702

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/10/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trusty, Robbin (Ms.)

Contributor address; City; State; Zip Code
2630 Barton Hills Dr.
Austin, TX 78704

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Project Manager

Employer (See Instructions)
Austin Energy

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Van Os, David (Mr.)

Contributor address; City; State; Zip Code
7700 Shoal Creek Blvd
Austin, TX 78757

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

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: 37/40 Report: 39/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/14/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Van Os, David (Mr.)

6 Contributor address; City; State; Zip Code
7700 Shoal Creek Blvd
Austin, TX 78757

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Van Os, Rachel (Ms.)

Contributor address; City; State; Zip Code
7700 Shoal Creek Blvd
Austin, TX 78757

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Van Os, Rachel (Ms.)

Contributor address; City; State; Zip Code
7700 Shoal Creek Blvd
Austin, TX 78757

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Viktorin, Richard (Mr.)

Contributor address; City; State; Zip Code
2005 Exposition Blvd
Austin, TX 78703

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2012

Full name of contributor ☐ out-of-state PAC (ID# _____)
Waley, Roy (Mr.)

Contributor address; City; State; Zip Code
1301 B Palo Duro
Austin, TX 78757

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

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

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: 38/40 Report: 40/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00006000

4 Date

07/14/2012

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Walton, Cory (Mr.)

6 Contributor address; City; State; Zip Code
1701 Bouldin Ave
Austin, TX 78704

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)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Weed, Betty (Ms.)

07/14/2012

Contributor address; City; State; Zip Code
2218 Alta Vista Avenue
Austin, TX 78704

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Researcher

Employer (See Instructions)
Texas Education Agency

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Weldon, Matt (Mr.)

07/14/2012

Contributor address; City; State; Zip Code
9808 Grand Oak Dr
Austin, TX 78750

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wendler, Ed (Mr.)

09/07/2012

Contributor address; City; State; Zip Code
4803 Balcones Dr
Austin, TX 78731

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)
Real Estate Developer

Employer (See Instructions)
EW Development Co

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Whitaker, Kate (Ms.)

11/04/2012

Contributor address; City; State; Zip Code
9013 Ovalla Dr
Austin, TX 78749

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

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

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: 39/40 Report: 41/49

2 FILER NAME Shea, Brigid (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00006000

4 Date

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

Wieland, Mark (Mr.)

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

07/14/2012

6 Contributor address; City; State; Zip Code

P.O. Box 2743
Austin, TX 78768

\$100.00

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Williams, Ellen (Ms.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/14/2012

Contributor address; City; State; Zip Code

802 E 47th St
Austin, TX 78751

\$100.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Property ManagementEmployer (See Instructions)
Self

Date

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

Wilson, Rand (Mr.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

10/26/2012

Contributor address; City; State; Zip Code

3 Lester Terrace
Somerville, MA 02144

\$20.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Wofford, D.J. (Mrs.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/03/2012

Contributor address; City; State; Zip Code

1701 Duke Ave
Austin, TX 78757

\$25.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Wogan, David (Mr.)

Amount of
contribution (\$)In-kind contribution
description (if applicable)

07/02/2012

Contributor address; City; State; Zip Code

4609 Caswell Ave.
Austin, TX 78751

\$25.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
EngineerEmployer (See Instructions)
Austin Energy

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 40/40 Report: 42/49	
2 FILER NAME Shea, Brigid (Ms.)				3 ACCOUNT # (Ethics Commission filers) 00006000	
4 Date 11/04/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wood, Regina (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 605 Natali St Austin, TX 78745		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) Consultant			10 Employer (See Instructions) Self		
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yznaga, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code 2401 Briargrove 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) Consultant			Employer (See Instructions) Self		
Date 07/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yznaga, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code 2401 Briargrove Austin, TX 78704		Amount of contribution (\$) \$40.00	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		

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: 1/6 Report: 43/49		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 07/09/2012	5 Payee name Constant Contact				
6 Amount (\$) \$37.31	7 Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/10/2012	Payee name Constant Contact				
Amount (\$) \$37.31	Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/10/2012	Payee name Constant Contact				
Amount (\$) \$37.31	Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 10/10/2012	Payee name Constant Contact				
Amount (\$) \$37.31	Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
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: 2/6 Report: 44/49		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 11/13/2012	5 Payee name Constant Contact				
6 Amount (\$) \$37.31	7 Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/10/2012	Payee name Constant Contact				
Amount (\$) \$37.31	Payee address City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Marketing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/02/2012	Payee name Einstein Brothers				
Amount (\$) \$25.81	Payee address City; State; Zip Code 2404 Guadalupe Street Austin, TX 78705				
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"/> Breakfast for workers		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 10/31/2012	Payee name Facebook				
Amount (\$) \$7.00	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) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser Advertising		
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: 3/6 Report: 45/49		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 07/18/2012	5 Payee name Greenberg, Joel (Mr.)				
6 Amount (\$) \$200.00	7 Payee address City: State: Zip Code 6806 Daugherty Austin, TX 78757				
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"/> Contract Labor for Video and Social Media		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/31/2012	Payee name Moffat, Susan (Ms.)				
Amount (\$) \$100.00	Payee address City: State: Zip Code 4112 Speedway Austin, TX 78751				
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"/> Donation Refund		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/02/2012	Payee name Office Depot				
Amount (\$) \$322.79	Payee address City: State: Zip Code 2620 W Anderson Lane Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage and paper		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/04/2012	Payee name Oliver, Bill (Mr.)				
Amount (\$) \$300.00	Payee address City: State: Zip Code 2728 S Congress #12 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Musical Services at Fundraiser		
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: 4/6 Report: 46/49		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000
4 Date 12/31/2012	5 Payee name Paypal			
6 Amount (\$) \$88.67	7 Payee address City; State; Zip Code 2145 Hamilton Avenue San Jose, CA 95125			
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"/> Online Transaction Fees for entire reporting period	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/26/2012	Payee name Shea, Brigid (Ms.)			
Amount (\$) \$10,760.00	Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Partial Loan Repayment	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 09/17/2012	Payee name Shea, Brigid (Ms.)			
Amount (\$) \$3,000.00	Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Partial Loan Repayment	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 10/30/2012	Payee name Shea, Brigid (Ms.)			
Amount (\$) \$200.00	Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Partial Loan Repayment	
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: 5/6 Report: 47/49		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000	
4 Date 11/01/2012	5 Payee name Shea, Brigid (Ms.)				
6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757				
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"/> Partial Loan Repayment		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/29/2012	Payee name Shea, Brigid (Ms.)				
Amount (\$) \$4,000.00	Payee address City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Partial Loan Repayment		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/16/2012	Payee name Square				
Amount (\$) \$8.67	Payee address City; State; Zip Code 110 5th Street San Francisco, CA 94103				
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"/> Transaction Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/04/2012	Payee name Wood, Cindy (Ms.)				
Amount (\$) \$100.00	Payee address City; State; Zip Code 10400 Hill Country Skyline Dripping Springs, TX 78620				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Entertainment at Fundraiser		
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: 6/6 Report: 48/49		2 FILER NAME Shea, Brigid (Ms.)		3 ACCOUNT # (TEC filers) 00006000
4 Date 07/01/2012	5 Payee name Worley Printing Co., Inc.			
6 Amount (\$) \$361.55	7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
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"/> Print Fundraiser Invitations	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

**INTEREST EARNED, OTHER CREDITS/GAINS/
REFUNDS, AND PURCHASE OF INVESTMENTS****SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 49/49**2** FILER NAME Shea, Brigid (Ms.)**3** ACCOUNT # (Ethics Commission filers)
00006000

4 Date	5 Name of person from whom amount is received	8 Amount (\$)
07/18/2012	Grande Communications Address of person from whom amount is received; City; State; Zip Code 1923 E. 7th St STE 100 Austin, TX 78702	\$77.30
	7 Purpose for which amount is received Refund for services not used	
12/06/2012	JPMorgan Chase Bank, N.A. Address of person from whom amount is received; City; State; Zip Code 7600 Burnet Road Austin, TX 78757	\$0.09
	Purpose for which amount is received Interest on Checking Account	