FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Mrs. Shona	MI	OFFICE USE ONLY
NAME	NICKNAME LAST	SUFFIX	Date Received
	Huffman		RECEIVED //
4 CANDIDATE / OFFICEHOLDER MAILING		CITY; STATE; ZIP CODE	JUL 1 5 2016
ADDRESS Change of Address	10324 Fire Ridge	e Dr. Frisco TX 75033	City Secretary's Office
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (469) 189-6860	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI : T	Receipt # Amount \$
NAME .	Mr. Kwt	SUFFIX	Date Processed
	North		Date Imaged
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SU		ZIP CODE
ADDRESS (Residence or Business)	1189 Timber Lane F	risao TX 75034	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 725.6373	EXTENSION	
9 REPORT TYPE	January 15 30th day before ele	lection Runoff	15th day after campaign treasurer appointment
	July 15 Sth day before elect	ction Exceeded \$500 limit	(Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year	THROUGH Month	Day Year 16
11 ELECTION	ELECTION DATE Month Day Year Primary	ELECTION TYPE Runoff Other	
	6 / 18/16 General	Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	Frisco City Council Pl. :	2	
	GO TO F	PAGE 2	

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Sh	ona Huf	<i>f</i> man	15 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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	Pan Pon Contl		
-	GENERAL	Frisco Fire Fighters Assn. Con	n. tor a Nesp. 61047		
	SPECIFIC	COMMITTEE ADDRESS			
	₩ : ¥*	PO BOX 1206 Frisco TX -	16034		
Additional Pages		Stephen W. Hyatt			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		80 Derby Dr. Van Alolyne	TX 75495		
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	NN ED \$		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	. \$		
EXPENDITURE TOTALS	3. TOTAL P	\$			
	4. TOTAL F	POLITICAL EXPENDITURES	\$		
CONTRIBUTION BALANCE		DLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST (DRTING PERIOD	DAY \$		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		HE \$		
18 AFFIDAVIT					
		true and correct and includes all inforunder Title 15, Election Code.	Aman		
		Signature of Candi	date or Officeholder		
AFFIX NOTARY STAMP	/SEALABOVE				
Sworn to and subscrib	oed before me, by	the said	, this the		
		certify which, witness my hand and seal of office.			
Signature of officer adr	ministering oath	Printed name of officer administering oath	Title of officer administering oath		

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	1 - 1 - 1 1	<u> </u>	5 Filer ID (Ethics Commission Filers)	
5	hona H	ittman "	2 15 (21.1100 20111111001011 1 11010)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CAN	NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDIT DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WIT DISSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS TURES.	HOUT THE CANDIDATE'S OR OFFICEHOLDER'S	
	COMMITTEE TYPE	COMMITTEE NAME	D // A	
	GENERAL	Frisco Police Officers Asse	C. PAC	
	SPECIFIC	PO Box 2263 Frisco TX	75034	
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages		Grant Cottingham		
		COMMITTEE CAMPAIGN TREASURED ADDRESS		
		po box 2263 Frisco T	X 75034	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0	
EXPENDITURE TOTALS				
	4. TOTAL	\$ 2788.97		
CONTRIBUTION BALANCE	5. TOTAL P	AY \$		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	\$ 6578.44	
8 AFFIDAVIT				
		I swear, or affirm, under penalty of per true and correct and includes all inforn under Title 15, Election Code.		
		Signature of Candid	late or Officeholder	
AFFIX NOTARY STAMP	/SEALABOVE	Signature of Garage	ate of Officerolder	
Sworn to and subscri	bed before me. b	y the said	, this the	
		o certify which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer administering oath	

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	na Huff	man 15 F	iler ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S				
	COMMITTEE TYPE	COMMITTEE NAME Dools Dools			
	GENERAL	Texas Reators PAC COMMITTEE ADDRESS			
	SPECIFIC	Po Box 2246 Austin TX	18768-2246		
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages		Kaki Lybbert			
		3537 Teasley Lane Denton -	TX 76210		
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED				
	4. TOTAL	4. TOTAL POLITICAL EXPENDITURES \$ 2788.97			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$				
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$ 6578.44		
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Signature of canerdate or Officeholder					
AFFIX NOTARY STAMP	P/SEALABOVE				
Sworn <u>to and sub</u> scri	bed before me, b	y the said Show Huffman	_, this the		
danor July	, 20_16, to	ROSALIND L. RIGHETTI MY COMMISSION EXPIRES July 13, 2017	Modany to of officer administration and		
Signature of officer ac	iministering oath	Printe I name of officer administering eath Ti	tle of officer administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	Shona Huffman	O (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	s \$2188.97
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUT	TIONS \$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	NS \$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Giff/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME Shona Huffm	an	3 Filer ID (Ethics Commission Filers)		
4 Date 6/12/16	5 Payee name Works				
6 Amount (\$) \572.72	7 Payee address; City; State; Zip Code 5850 TOWN G COUNTY B FriSCO TX 75034	vd			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense Amount of the complete Schedule T.		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
6/12/16	True Works				
Amount (\$)	Payee address; City; State; Zip Code 5850 Town 9 Country				
238.70	Frisco TX 75034				
PURPOSE OF EXPENDITURE	Advertising Expense		side of Texas. Complete Schedule T. TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
6/12/16	True Works				
Amount (\$)	Payee address; City; State; Zip Code 5850 Town & County				
67.12	Frisco TX 75034				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ride of Texas. Complete Schedule T. TX, officeholder living expense Push Cards		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (entry a category not listed above)

Candidate/Officeholder/Politic	al Committee	Legal Services	ionalo Experioe	Salaries/W	ages/Contract Labo	or	Other (enter a	category not listed above)
Credit Card Payment		The Instructi	on Guide explai	ns how to co	omplete this form	m.		
1 Total pages Schedule F1	2 FILER N	ong H	iffmar)			3 Filer ID (Ethics Commission Filers)
4 Date 1114	5 Payee na	Lusk						
6 Arrhount (\$) 230.21	7 Payee at	Mallor	City; State; Z	Zip Code				
250.01	F	risco t	X 7503	35				
8	(a) Category	(See Categories lis	sted at the top of this s	schedule)	(b) Description	n		
PURPOSE							de of Texas. Comp	
OF EXPENDITURE	Ad.101	chicina	V4 2.0	a			TX, officeholder	
	MUVA	TISH IY	Expen	Se	SignI	instr	allati	on/Repair
9 Complete ONLY if direct expenditure to benefit C/O		ate / Officehold	er name		Office soug	ht		Office held
Date	Payee na	me	-					
6/27/16	GOD	addy I	nc.					
Amount (\$)	Payee ac	dress;	City; State; Z		010			
42.33	14455 900f	sdale.	yden K	01 SH 25260	2 249			
	Category	(See Categories lis	ted at the top of this s	chedule)	Description			
PURPOSE OF							e of Texas. Compl	
EXPENDITURE	DAVIOR	tising	1/2000	~	Check if	Austin, T	X, officeholder li	ving expense
	ruva	1131119	experie		Web t	tas	hing	
Complete ONLY if direct expenditure to benefit C/OF		ate / Officeholde	er name		Office sough	ht	\circ	Office held
Date	Payee na	me						
6/18/16	Mattr	rew S	bwell					
Amount (\$)	Payee ad		City; State; Zi	p Code				
194.85	13407 Fris	Lyndh co Tx	urst 7503.	5				
DURROSE	Category	(See Categories list	ed at the top of this so	chedule)	Description		e of Texas. Comple	ata Schadula T
PURPOSE OF							of fexas. Comple (, officeholder liv	
EXPENDITURE	('ontr	art 1	lbor		Cia 4	0	. 5	11/1/00 10 = 1 =
	00 -11				olyn	repl	air, De	livery, new
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		te / Officeholde	er name		Office sough	ht		Office held
	ATT	ACH ADDITIO	NAL COPIES	OF THIS S	CHEDULE AS	NEEDE	ED .	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Fees Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/Donations Made By Polling Expense Travel In District Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pades Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) City; State; Zip Code 8 (b) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense EXPENDITURE 9 Complete ONLY if direct Candidate / Officeholder name Office held expenditure to benefit C/OH Payee name Payee address: Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense EXPENDITURE

EXPENDITURE CATEGORIES FOR BOX 8(a)

	ONLY if direct re to benefit C/OI	Candidate / Officenoider name	Office sou g nt	Office held
Date	,	Payee name		
6/19	3/16	Costco		
Amount	(\$)	Payee address; City; State; Zip Code		
241	5.00	11220 Dallas PKWY Frisco TX 75033		
		Category (See Categories listed at the top of this schedule)	Description	
	POSE		Check if travel outside of Tex	xas. Complete Schedule T.
	OF IDITURE		Check if Austin, TX, office	ceholder living expense
200		Event Expense	Food /Bever	rage
	ONLY if direct re to benefit C/OF	Candidate / Officeholder name	Office sought	Office held