

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<div style="display: flex; justify-content: space-between;"> <div> 1 Filer ID (Ethics Commission Filers) </div> <div> 2 Total pages filed: </div> </div>	
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <div> MS / MRS / MR Ms. NICKNAME </div> <div> FIRST Shona LAST </div> <div> MI L SUFFIX </div> </div> <p style="text-align: center; margin-top: 10px;">Huffman</p>		<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received <div style="font-size: 1.2em; font-weight: bold;">RECEIVED</div> <div style="font-size: 1.2em; font-weight: bold;">MAR 27 2019</div> CITY SECRETARY'S OFFICE <i>C 3:40pm jol</i> Date Hand-delivered or Date Postmarked </div>
	<div style="display: flex; justify-content: space-between;"> <div> ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <input type="checkbox"/> Change of Address </div> <div> 10324 Fire Ridge, Frisco TX 75033 </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div> 5 CANDIDATE / OFFICEHOLDER PHONE </div> <div> AREA CODE (469) </div> <div> PHONE NUMBER 789-6860 </div> <div> EXTENSION </div> </div>			
<div style="display: flex; justify-content: space-between;"> <div> 6 CAMPAIGN TREASURER NAME </div> <div> MS / MRS / MR Mr NICKNAME </div> <div> FIRST Kurt LAST </div> <div> MI SUFFIX </div> </div> <p style="text-align: center; margin-top: 10px;">North</p>			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		<div style="display: flex; justify-content: space-between;"> <div> STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE </div> <div> 1189 Timber Lane Frisco TX 75034 </div> </div>	
8 CAMPAIGN TREASURER PHONE		<div style="display: flex; justify-content: space-between;"> <div> AREA CODE (972) </div> <div> PHONE NUMBER 724-6373 </div> <div> EXTENSION </div> </div>	
9 REPORT TYPE		<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> January 15 </div> <div style="width: 50%;"> <input checked="" type="checkbox"/> 30th day before election </div> <div style="width: 50%;"> <input type="checkbox"/> Runoff </div> <div style="width: 50%;"> <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) </div> <div style="width: 50%;"> <input type="checkbox"/> July 15 </div> <div style="width: 50%;"> <input type="checkbox"/> 8th day before election </div> <div style="width: 50%;"> <input type="checkbox"/> Exceeded \$500 limit </div> <div style="width: 50%;"> <input type="checkbox"/> Final Report (Attach C/OH - FR) </div> </div>	
10 PERIOD COVERED		<div style="display: flex; justify-content: space-between;"> <div> Month / Day / Year 1 / 1 / 2019 </div> <div> THROUGH </div> <div> Month / Day / Year 3 / 25 / 2019 </div> </div>	
11 ELECTION		<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month / Day / Year 5 / 4 / 2019 </div> <div> ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Other Description </div> </div>	
12 OFFICE		<div style="display: flex; justify-content: space-between;"> <div> OFFICE HELD (if any) Frisco City Council Place 2 </div> <div> 13 OFFICE SOUGHT (if known) </div> </div>	

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SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Shona Huffman</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>27,220.00</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>200.00</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>4587.50</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/10/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Rex & Sherese Glendenning

6 Contributor address; City; State; Zip Code

12400 Preston Frisco TX 75033

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/10/19

Full name of contributor

☐ out-of-state PAC (ID#:

Matt & Francesca Kiran

Contributor address; City; State; Zip Code

15504 W. FM 455, Celina TX 75009

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/10/19

Full name of contributor

☐ out-of-state PAC (ID#:

Brian & Genera Polster

Contributor address; City; State; Zip Code

7427 Angelica Ln. Frisco TX 75033

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/10/19

Full name of contributor

☐ out-of-state PAC (ID#:

Kathi & Tim Scacherer

Contributor address; City; State; Zip Code

4544 Biltmoore Tr Frisco TX 75034

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>4/5</u>
2 FILER NAME Shona Huffman		3 Filer ID (Ethics Commission Filers)
4 Date <u>1/10/19</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>David Anderson</u> 6 Contributor address; City; State; Zip Code <u>2614 Creek Dr. Frisco TX 75033</u>	7 Amount of contribution (\$) <u>1000.00</u>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>1/10/19</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Cal & Pam Bostwick</u> Contributor address; City; State; Zip Code <u>3279 Birchridge Frisco TX 75033</u>	Amount of contribution (\$) <u>500.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>1/10/19</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Melissa & Kevin Smith</u> Contributor address; City; State; Zip Code <u>5249 Oakhurst Frisco TX 75033</u>	Amount of contribution (\$) <u>200.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>1/10/19</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>David & Wren Orard</u> Contributor address; City; State; Zip Code <u>5004 Thackery Frisco TX 75034</u>	Amount of contribution (\$) <u>250.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule A1:

3/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/10/19

5 Full name of contributor

TREPAC

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

PO Box 2246, Austin TX 78768

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/2/19

Full name of contributor

Will Sowell

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

13407 Lyndhurst, Frisco TX 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/2/19

Full name of contributor

Janice Huffman

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

10955 E. 76th St. S, Tulsa OK 74133

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/10/19

Full name of contributor

David Box

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

9453 Ironwood Frisco TX 75033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule A1:

~~3~~ 4/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/10/19

5 Full name of contributor

Mike Barber

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

6 Contributor address;

City; State; Zip Code

7608 Regent, Frisco TX 75034

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/10/19

Full name of contributor

Tim & Carrie Bourne

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

2954 Reynolds, Frisco TX 75033

1070.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/10/19

Full name of contributor

Robert Cox

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

7112 Silverbrook, Frisco TX 75034

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/10/19

Full name of contributor

Rene Archambault

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

11542 LaCantenna, Frisco TX 75034

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages, Schedule A1: 5/16
2 FILER NAME Shona Huffman		3 Filer ID (Ethics Commission Filers)
4 Date 1/10/19	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gopal Ponangi 6 Contributor address; City; State; Zip Code 14937 Begonia, Frisco TX 75035	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/16/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: James & Lynnette Sinacola Contributor address; City; State; Zip Code 19 Stonebriar Way, Frisco TX 75034	Amount of contribution (\$) 750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/16/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Chris & Ashlee Kleinert Contributor address; City; State; Zip Code 5909 Steuben Ct. Dallas TX 75248	Amount of contribution (\$) 750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/13/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Debbie Pasha Contributor address; City; State; Zip Code 1449 Trail View Frisco TX 75034	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6/16
2 FILER NAME Shona Huffman		3 Filer ID (Ethics Commission Filers)
4 Date 1/16/19	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: William & Mimi Vanderstraaten 6 Contributor address; City; State; Zip Code 8111 Westchester, Suite 800, Dallas TX 75225	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/14/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lynette Luedicke Contributor address; City; State; Zip Code 5401 Patton Rouge Frisco TX 75035	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/15/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Whitney Grogan Contributor address; City; State; Zip Code 6331 Mesco Dallas TX 75225	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/15/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jeresa & Michael Sinicola Contributor address; City; State; Zip Code 6701 Glendenny, Plano TX 75024	Amount of contribution (\$) 750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

~~6~~ 5 7/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/15/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Jeff + Pam Brauner

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

4364 San Carlos, Dallas TX 75205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/14/19

Full name of contributor

☐ out-of-state PAC (ID#:

Dick Peasley

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

7094 Bay Hill Frisco TX 75036

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/16/19

Full name of contributor

☐ out-of-state PAC (ID#:

Fehmi + Elizabeth Karahan

Amount of contribution (\$)

800.00

Contributor address;

City; State; Zip Code

5905 Legacy Dr. Plano TX 75024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/16/19

Full name of contributor

☐ out-of-state PAC (ID#:

Karen Cunningham

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

13309 Duesenberg Frisco TX 75033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

7/15/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/16/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Buddy Minett

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

8548 Scott Dr. Frisco TX 75034

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/16/19

Full name of contributor

☐ out-of-state PAC (ID#:

Angie Svitak

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

3256 Cumberland Frisco TX 75033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/23/19

Full name of contributor

☐ out-of-state PAC (ID#:

Irey Sibley

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

4851 LBJ Suite 210, Dallas TX 75244

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/16/19

Full name of contributor

☐ out-of-state PAC (ID#:

Gary Woody & Katrina Watland

Amount of contribution (\$)

150.00

Contributor address; City; State; Zip Code

1242 Timber Ln. Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8/15 9/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/16/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Lynn Silguero

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

4619 Pine Valley Frisco 75034

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/21/19

Full name of contributor

☐ out-of-state PAC (ID#:

Brittany Colberg

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1058 Helen Frisco 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/22/19

Full name of contributor

☐ out-of-state PAC (ID#:

Michael & Yvette Rhea

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3360 Berkwood Frisco 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/19

Full name of contributor

☐ out-of-state PAC (ID#:

Megan Nguyen-Trinh

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

12055 Kingsville Frisco TX 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4/15 10/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/28/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Russell Laughlin

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

3217 Fox Hollow Ft. Worth TX 76109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/30/19

Full name of contributor

☐ out-of-state PAC (ID#:

Barbara Fasola

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

5046 Oak Knoll Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/19

Full name of contributor

☐ out-of-state PAC (ID#:

Will Shaddock

Amount of contribution (\$)

2500.00

Contributor address; City; State; Zip Code

5216 Corinthian Bay Plano TX 75093

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/1/19

Full name of contributor

☐ out-of-state PAC (ID#:

Joel & Julie Young

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code

6202 Cranston Fredericksburg VA 22407

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

10/15 11/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

1/28/19

5 Full name of contributor

Mike Barry

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

6217 Geneva Ft. Worth TX 76116

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/28/19

Full name of contributor

Robert Folzenlogen

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

1916 Berkeley Dallas TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/31/19

Full name of contributor

Peter Shaddock

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

2500.00

Contributor address; City; State; Zip Code

58 Braewood, Dallas TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/1/19

Full name of contributor

Alan & Jane Mesches

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

9313 Penton Place Frisco TX 75035

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

151216

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

2/1/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Giff + Heather Gerhardt

6 Contributor address;

City; State; Zip Code

15414 Jewelwood, Frisco TX 75035

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/1/19

Full name of contributor

☐ out-of-state PAC (ID#:

Cortney Lynch

Contributor address;

City; State; Zip Code

16106 Buffalo Grass Frisco TX 75033

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/1/19

Full name of contributor

☐ out-of-state PAC (ID#:

Lisa Bridwell

Contributor address;

City; State; Zip Code

5985 Willoughby Frisco TX 75033

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/1/19

Full name of contributor

☐ out-of-state PAC (ID#:

Shanna Keaveny

Contributor address;

City; State; Zip Code

6053 Connely, Frisco 75034

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>12/15 13/14</u>
2 FILER NAME <div style="text-align: center;">Shona Huffman</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center;">2/1/19</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center;">Kristi Sauer</div>	7 Amount of contribution (\$) <div style="text-align: center;">50.00</div>
6 Contributor address; City; State; Zip Code <div style="text-align: center;">22 Fireberry Ct. Frisco TX 75033</div>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <div style="text-align: center;">2/1/19</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center;">mark Hill</div>	Amount of contribution (\$) <div style="text-align: center;">300.00</div>
Contributor address; City; State; Zip Code <div style="text-align: center;">9950 Little Horn Circle Frisco 75035</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <div style="text-align: center;">2/10/19</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center;">Cindy Hons</div>	Amount of contribution (\$) <div style="text-align: center;">25.00</div>
Contributor address; City; State; Zip Code <div style="text-align: center;">7145 Yellowstone Frisco TX 75038</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <div style="text-align: center;">2/10/19</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center;">Anna + John Martinez</div>	Amount of contribution (\$) <div style="text-align: center;">100.00</div>
Contributor address; City; State; Zip Code <div style="text-align: center;">8310 Dianthus Stead Boerne TX</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

13/15 14/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

2/10/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Dana Cheney

6 Contributor address;

City; State; Zip Code

11377 Deep Canyon Frisco 75033

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/10/19

Full name of contributor

☐ out-of-state PAC (ID#:

Dave Wilcox

Contributor address;

City; State; Zip Code

PO BOX 5163 Frisco TX 75035

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/15/19

Full name of contributor

☐ out-of-state PAC (ID#:

Sadaf Haq

Contributor address;

City; State; Zip Code

12167 Joscana, Frisco TX 75035

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/15/19

Full name of contributor

☐ out-of-state PAC (ID#:

Pennie Moreno

Contributor address;

City; State; Zip Code

11808 Galleon Frisco TX 75035

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>14/15 15/16</u>
2 FILER NAME Shona Huffman		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/16/19</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Frank McIlwain</u> 6 Contributor address; City; State; Zip Code <u>3685 Crossbow Frisco TX 75033</u>	7 Amount of contribution (\$) <u>250.00</u>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/16/19</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Gill Angelo</u> Contributor address; City; State; Zip Code <u>3504 Jraw's Country Circle Austin TX 78735</u>	Amount of contribution (\$) <u>150.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/19/19</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Jim & Dru Newman</u> Contributor address; City; State; Zip Code <u>12522 Wineland Ct. Frisco TX 75033</u>	Amount of contribution (\$) <u>1000.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>3/20/19</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Chris Moss</u> Contributor address; City; State; Zip Code <u>10341 Cassetta Frisco TX 75035</u>	Amount of contribution (\$) <u>250.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

15/15 16/16

2 FILER NAME

Shona Huffman

3 Filer ID (Ethics Commission Filers)

4 Date

3/18/19

5 Full name of contributor

☐ out-of-state PAC (ID#:

Michelle Kellen

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

32 Juniper Clifton NY 12065

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/20

Full name of contributor

☐ out-of-state PAC (ID#:

Craig Mann & Kathryn Hall

Amount of contribution (\$)

2500.00

Contributor address;

City; State; Zip Code

6801 Gaylord Suite 100, Frisco TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>Shona Huffman</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <u>200.00</u>	
5 Date <u>1/10/19</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Will Sowell</u>	8 Amount of Contribution \$ <u>200.00</u>	9 In-kind contribution description <u>event drinks</u>
7 Contributor address; City; State; Zip Code <u>13407 Lyndhurst Frisco TX 75035</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7		2 FILER NAME Shona Huffman		3 Filer ID (Ethics Commission Filers)	
4 Date 1/1/19		5 Payee name Punchbowl			
6 Amount (\$) 23.88		7 Payee address; City; State; Zip Code 50 Speen St #202 Framingham MA 01701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/3/19		Payee name El Dorado All Storage			
Amount (\$) 123.00		Payee address; City; State; Zip Code 6707 El Dorado Frisco TX 75033			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/8/10		Payee name Chloe Huffman			
Amount (\$) 100.00		Payee address; City; State; Zip Code 10324 Fire Ridge Frisco TX 75033			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor (Signs)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> 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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7		2 FILER NAME Shona Huffman		3 Filer ID (Ethics Commission Filers)	
4 Date 2/27/19		5 Payee name Color Craft			
6 Amount (\$) 205.65		7 Payee address; City; State; Zip Code 5858 Town & Country #702 Frisco TX 75034			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/26/19		Payee name Facebook			
Amount (\$) 25.01		Payee address; City; State; Zip Code 1 Hacker Way, Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/4/19		Payee name El Dorado All Storage			
Amount (\$) 123.00		Payee address; City; State; Zip Code 6707 El Dorado Frisco TX 75033			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> 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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7		2 FILER NAME Shona Huffman		3 Filer ID (Ethics Commission Filers)	
4 Date 2/1/19		5 Payee name Anedot			
6 Amount (\$) 206.02		7 Payee address; City; State; Zip Code 1920 McKinney Ave. 7th floor Dallas TX 75201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees (gan. online)		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/1/19		Payee name Anedot			
Amount (\$) 117.41		Payee address; City; State; Zip Code 1920 McKinney Ave. 7th floor Dallas TX 75201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees (Feb. online)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/1/19		Payee name Fred Lusk			
Amount (\$) 493.32		Payee address; City; State; Zip Code 9912 Mallory Dr. Frisco TX 75035			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor (Signs)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> 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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>7</u>		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date <u>3/11/19</u>		5 Payee name <u>Stickeryou.com</u>			
6 Amount (\$) <u>139.04</u>		7 Payee address; City; State; Zip Code <u>219 Dufferin, Unit 6A Toronto, ON M6K3J1</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>3/4/19</u>		Payee name <u>Facebook</u>			
Amount (\$) <u>25.00</u>		Payee address; City; State; Zip Code <u>1 Hacker Way, Menlo Park, CA 94025</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>3/4/19</u>		Payee name <u>El Dorado All Storage</u>			
Amount (\$) <u>123.00</u>		Payee address; City; State; Zip Code <u>6707 El Dorado Frisco TX 75033</u>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Rental Expense</u>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> 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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Shona Huffman	3 Filer ID (Ethics Commission Filers)
4 Date 3/15/19	5 Payee name Matthew Sowell	
6 Amount (\$) 75.00	7 Payee address; City; State; Zip Code 13407 Lyndhurst, Frisco TX 75035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor (Signs)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 3/15/19	Payee name First Graphics	
Amount (\$) 1677.88	Payee address; City; State; Zip Code 229 Barron Garland TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense Signs	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 3/6/19	Payee name Color Craze	
Amount (\$) 343.15	Payee address; City; State; Zip Code 5858 Town & Country #702 Frisco TX 75034	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> 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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Shona Huffman	3 Filer ID (Ethics Commission Filers)
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4 Date 3/16/19	5 Payee name Lilly Huffman
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6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 10324 Fire Ridge Frisco TX 75033
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor signs	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
--	---	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/18/19	Payee name Custom Made Golf Events
------------------------	--

Amount (\$) 463.99	Payee address; City; State; Zip Code 346 Route 59 Airmont NY 10952
------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising/Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/18/19	Payee name Genesis's Metro
------------------------	--------------------------------------

Amount (\$) 100.00	Payee address; City; State; Zip Code 9750 John W. Elliott Frisco TX 75034
------------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense golf sponsorship	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Shona Huffman	3 Filer ID (Ethics Commission Filers)
4 Date 3/19/19	5 Payee name Anedot	
6 Amount (\$) 18.15	7 Payee address; City; State; Zip Code 1920 McKinney 7th floor Dallas TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees - online	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 3/19/19	Payee name Josh Sowell	
Amount (\$) 105.00	Payee address; City; State; Zip Code 13407 Lyndhurst Frisco TX 75035	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor signs	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED