FORM C/OH **CANDIDATE / OFFICEHOLDER** CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 30 CANDIDATE / MS/MRS/MR **FIRST** MI OFFICE USE ONLY Date Received **OFFICEHOLDER** Brian NAME JUL 16 2020 **NICKNAME SUFFIX** LAST @9:56 am Livingston CITY SECRETARY'S OFFICE Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** 9520 Alberta Court MAILING Receipt # Amount **ADDRESS** X Change of Address Frisco, TX 75033 Date Processed Date Imaged **FIRST CAMPAIGN** MS/MRS/MR MI **TREASURER** NAME Carol L. **NICKNAME** LAST **SUFFIX** Gallagher **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE; ZIP CODE **TREASURER ADDRESS** 7070 Glen Abbey Court, Frisco, TX 75036 (Residence or Business) CAMPAIGN PHONE NUMBER **EXTENSION** AREA CODE **TREASURER** PHONE 714-615-1625 REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Exceeded \$500 limit Final Report (Attach C/OH-FR) Х July 15 8th day before election **PERIOD** Month Day Year Month Day Year COVERED 01/01/2020 **THROUGH** 06/30/2020 **ELECTION TYPE** 10 ELECTION **ELECTION DATE** Month Day Other Year Primary Runoff General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Frisco City Council Place 6 **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 30

				2 01 30					
13 C / OH NAME	Livingston, Brian		14 Filer ID						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditu These expenditures may have been made without officeholders are required to report this informatio	the candidate's or officeho	older's knowledge or					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	GENERAL								
		COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 40.00					
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 18,344.89					
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	SITEMIZED	\$ 0.00					
to see to the contract	4. TOTAL POLITIC	AL EXPENDITURES		\$ 13,233.58					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 7,924.25					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00					
17 AFFADAVIT									
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. SHARON L. PERRY Notary Public, State of Texas Comm. Expires 03-22-2022 Notary ID 128215849 Notary ID 128215849 Signature of Candidate or Officeholder									
AFFIX NOTARY STAMP / SEAL ABOVE									
Sworn to and subso	Sworn to and subscribed before me, by the said								
Signature of office	Leur	Sharron Terry Printed name of officer administering	Notar Title of officer a	dministering oath					
Signature of offic	Ser administrating	Thined hame of officer authinstering	THE OF OTHER E	and the second second					

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

		3 of 30
19 Filer ID		
•	SUB	TOTAL AMOUNT
	\$	14,083.00
	\$	4,261.89
	\$	
	\$	
ΓΙΟΝS	\$	13,033.58
	\$	
BUTIONS	\$	
	\$	200.00
	\$	
ESS OF C/OH	\$	
BUTIONS	\$	
ONS RETURNED	\$	
111	TIONS BUTIONS BUTIONS ONS RETURNED	SUB \$ \$ \$ TIONS \$ \$ BUTIONS \$ \$ BUTIONS \$ \$ S S S S S S S S S S S S S S S S S

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	5	Fotal pages Schedule A1: Sch: 1/9 Rpt: 4/30		
2	FILER NAME Livingston, B	rian		3 F	Filer ID		
4	Date 06/11/2020	 5 Full name of contributor out-of-state PAC (ID#:_Axelrod, Jeffrey 6 Contributor address; City; State; Zip Code 3031 Bainbridge Lane Frisco, TX 75034 		7 /	Amount of Contribution (\$)	\$50.00	
8	Principal occu IT		Employer (See Instructions Self	<u> </u> 			
	Date 02/17/2020	Full name of contributor out-of-state PAC (ID#:_ Born, Terry Contributor address; City; State; Zip Code 7257 Reflection Bay Frisco, TX 75035		Amount of Contribution (\$)	\$200.00		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s) 			
	Date 01/13/2020	Full name of contributor)	<i>I</i>	Amount of Contribution (\$)	\$100.00	
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 02/14/2020	Full name of contributor out-of-state PAC (ID#:_ Bowman, Deborah Contributor address; City; State; Zip Code 7142 Glen Abbey Ct Frisco, TX 75034)	J.	Amount of Contribution (\$)	\$50.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)			
	Date 06/23/2020	Full name of contributor out-of-state PAC (ID#:_ Burgess, Cathy Contributor address; City; State; Zip Code PO Box 8604 Horseshoe Bay, TX 78657)	Å	Amount of Contribution (\$)	\$250.00	
	Principal occu Banker	pation / Job title (See Instructions)	Employer (See Instructions First Capital Bank of Te				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A :	L
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 5/30		
2	FILER NAME Livingston, B	rian		3	Filer ID		
4	Date 01/21/2020	 Full name of contributor out-of-state PAC (ID#:_ CB SPE 1, LLC Contributor address; City; State; Zip Code 2500 Dallas Parkway Suite 300 Plano, TX 75093)	7	Amount of Contribution (\$)	\$6	5.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 02/04/2020	Full name of contributor out-of-state PAC (ID#:_ Capex Consulting Group, LLC Contributor address; City; State; Zip Code 5245 Main Street Suite 235-171 Frisco, TX 75033)		Amount of Contribution (\$)	\$300	0.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/16/2020	Full name of contributor out-of-state PAC (ID#:_ Delange, Pat Contributor address; City; State; Zip Code 10390 Ridgecrest Street Frisco, TX 75033)		Amount of Contribution (\$)	\$4	0.00
	Principal occu FriscoSwim	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 02/16/2020	Full name of contributor out-of-state PAC (ID#:_ Dewitt, Nancy Contributor address; City; State; Zip Code 7067 Glen Abby Court Frisco, TX 75036)		Amount of Contribution (\$)	\$5	0.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 01/10/2020	Full name of contributor out-of-state PAC (ID#:_ Frisco Fire Association Contributor address; City; State; Zip Code 8601 Gary Burns Frisco, TX 75034)		Amount of Contribution (\$)	\$1,00	0.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/30	
2	FILER NAME Livingston, E	rian		3 Filer ID	
4	Date 02/19/2020	 Full name of contributor out-of-state PAC (ID#:_Frisco Fire Association Contributor address; City; State; Zip Code 8601 Gary Burns Frisco, TX 75034 	7 Amount of Contribution (\$)	\$4,000.00	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 06/19/2020	Full name of contributor out-of-state PAC (ID#:_ Godwin, Donald Contributor address; City; State; Zip Code 1201 Elm Street Suite 1700 Dallas, TX 75270)	Amount of Contribution (\$)	\$1,000.00
	Principal occu CEO/Charim	pation / Job title (See Instructions) an	Employer (See Instructions Godwin Bowman PC	:)	
	Date 01/13/2020	Full name of contributor	Amount of Contribution (\$)	\$75.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions))	
	Date 06/18/2020	Full name of contributor out-of-state PAC (ID#:_ King, Glyn Contributor address; City; State; Zip Code 4285 Glenhurst Lane Frisco, TX 75033)	Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)	
	Date 01/13/2020	Full name of contributor out-of-state PAC (ID#:_ Krishna, Rajalakshmi Contributor address; City; State; Zip Code 14802 Story Ln. Frisco, TX 75035)	Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
		•			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/9 Rpt: 7/30 3 Filer ID 2 FILER NAME Livingston, Brian 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$100.00 03/02/2020 LaTour, Benjamin 6 Contributor address; City; State; Zip Code 12718 Hollister Drive Frisco, TX 75033 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Raising Cane's **SVP Training** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$25.00 03/02/2020 Lawless, Shenna Contributor address; City; State; Zip Code 10122 Loving Trail Dr. Frisco, TX 75035 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$100.00 01/20/2020 Mann, Melissa Contributor address; City; State; Zip Code 8612 Pinnacle Dr Frisco, TX 75033 Employer (See Instructions) Principal occupation / Job title (See Instructions) Frisco Swim Swim Instructor Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$250.00 02/17/2020 McCormick, Lee Contributor address; City; State; Zip Code 5602 Coolwater Cove Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Community Development Associates Owner Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 02/02/2020 \$50.00 Merrell, Contributor address; City; State; Zip Code 5002 Lakeland Drive Frisco, TX 75035 Principal occupation / Job title (See Instructions) Employer (See Instructions) BGE, Inc. Traffic Engineer

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/9 Rpt: 8/30 3 Filer ID 2 FILER NAME Livingston, Brian 7 Amount of Contribution (\$) 5 Full name of contributor Date out-of-state PAC (ID#: \$150.00 Milholland, Michelle 01/08/2020 6 Contributor address; City; State; Zip Code 6050 Chamberlyne Dr. Frisco, TX 74034 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$50.00 06/17/2020 Moosa, Nazir Contributor address; City; State; Zip Code 3520 Preston Road Frisco, TX 75034 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** self employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$100.00 01/13/2020 Papudippu, Venkata Contributor address; City; State; Zip Code 8470 Kara Creek Road Frisco, TX 75034 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 03/17/2020 Patterson, Jared Contributor address; City; State; Zip Code 4412 Sapphire Drive Frisco, TX 75034 Employer (See Instructions) Principal occupation / Job title (See Instructions) Rapid Power Management **Energy Broker** Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 06/30/2020 \$100.00 Ponangi, Gopal Contributor address; City; State; Zip Code 14937 Begonia Drive Frisco, TX 75035 Employer (See Instructions) Principal occupation / Job title (See Instructions) **TCS** Manager

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/9 Rpt: 9/30 3 Filer ID 2 FILER NAME Livingston, Brian 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$10,00 06/17/2020 Ramos, Laura Contributor address; City; State; Zip Code 8784 California Drive Frisco, TX 75033 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Grealtor Analyst Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$250.00 01/27/2020 Redmond, John Contributor address; City; State; Zip Code 12555 Hawk Creek Dr Frisco, TX 75033 Principal occupation / Job title (See Instructions) Employer (See Instructions) InspectorIR Systems Executive Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$500.00 01/17/2020 Royer, Melanie Contributor address; City; State; Zip Code 5159 Stillwater Trail Frisco, TX 75034 Employer (See Instructions) Principal occupation / Job title (See Instructions) self **Physical Therapy** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 06/23/2020 Royer, Melanie Contributor address; City; State; Zip Code 5159 Stillwater Trail Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Physical Therapist** na Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 01/13/2020 \$100.00 Rumfield, Mike Contributor address; City; State; Zip Code 5116 Datewood Lane McKinney, TX 75071 Principal occupation / Job title (See Instructions) Employer (See Instructions) Law Enforcement Collin County

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/9 Rpt: 10/30 2 FILER NAME 3 Filer ID Livingston, Brian Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 01/10/2020 \$100.00 Siegele, Jason Contributor address; City; State; Zip Code 721 Smokehouse loop Benton, LA 71006 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/13/2020 \$100.00 Stammerich, John S. Contributor address; City; State; Zip Code 11187 Silver Horn Drive Frisco, TX 75033 Principal occupation / Job title (See Instructions) Employer (See Instructions) L3Harris Technologies Subcontracts Manager Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) \$100.00 06/16/2020 Stammerich, John S. Contributor address; City; State; Zip Code 11187 Silver Horn Drive Frisco, TX 75033 Principal occupation / Job title (See Instructions) Employer (See Instructions) L3Harris Technologies Subcontracts Manager Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 01/13/2020 Stelling, Peter \$40.00 Contributor address; City; State; Zip Code 1825 Calloway Lane Frisco, TX 75034 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Fireman Executive Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 01/22/2020 Stricklin, Dan \$500.00 Contributor address; City; State; Zip Code 856 Crystal Lake Dr Frisco, TX 75036 Principal occupation / Job title (See Instructions) Employer (See Instructions) National Sales Manager **NMC**

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/9 Rpt: 11/30 3 Filer ID 2 FILER NAME Livingston, Brian 7 Amount of Contribution (\$) 5 Full name of contributor Date out-of-state PAC (ID#: \$850.00 01/24/2020 Stricklin, Thomas 6 Contributor address; City; State; Zip Code 856 Crystal Lake Dr Frisco, TX 75036 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) National Sales Manager **NMC** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 03/07/2020 Stubbe, Dean Contributor address; City; State; Zip Code 4635 Pine Valley Drive TX 75034 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:_ Date \$250.00 03/31/2020 Thakkar, John Contributor address; City; State; Zip Code 6402 Shady Oaks Dr Frisco, TX 75034 Employer (See Instructions) Principal occupation / Job title (See Instructions) Ortus Labs, LLC CEO out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 02/19/2020 The Rudman Partnership \$500.00 Contributor address; City; State; Zip Code 4851 LBJ Freeway Suite 210 Dallas, TX 75244 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$250.00 02/05/2020 Thornbrugh, C. Michael Contributor address; City; State; Zip Code 4005 W. Twin Oaks Pl. Broken Arrow, OK 74011 Employer (See Instructions) Principal occupation / Job title (See Instructions)

	MONET	ARY POLITICAL CONTRIBUTIONS			SCHEDULE	E A1
	The Instru	ction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/30	
2	FILER NAME Livingston, E	trian		3	Filer ID	
4	Date 06/18/2020	 5 Full name of contributor out-of-state PAC (ID#:	7	Amount of Contribution (\$)	\$138.00	
8	Principal occu Sr. Executive	,	ployer (See Instructions urion)		
	Date 06/18/2020	Full name of contributor out-of-state PAC (ID#: White, Jennifer Contributor address; City; State; Zip Code 7915 Wood Ct Frisco, TX 75034)		Amount of Contribution (\$)	\$50.00
	Principal occu Veterinarian	·	nployer (See Instructions If	i)		
	Date 02/16/2020	Full name of contributor out-of-state PAC (ID#: Woods, Linda Contributor address; City; State; Zip Code 7091 Glen Abbey Ct Frisco, TX 75036			Amount of Contribution (\$)	\$50.00
	Principal occu Retired		nployer (See Instructions etired	s)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 13/30 3 Filer ID 2 FILER NAME Livingston, Brian \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS In-kind contribution Amount of 6 Full name of contributor out-of-state PAC (ID#: Date contribution (\$) description 01/13/2020 Celebrity Cafe & Bakery \$1,009.121 food for kickoff event at 7 Contributor address; City; State; Zip Code Verona Villa 3520 Preston Rd #111 Frisco, TX 75034 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Amount of In-kind contribution Date Full name of contributor out-of-state PAC (ID#: contribution (\$) description 01/15/2020 Frisco Fire Association \$872.771 Fire protection services Contributor address; City; State; Zip Code 8601 Gary Burns Drive Frisco, TX 74034 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 job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor Date out-of-state PAC (ID#: contribution (\$) description 01/21/2020 Frisco Fire Association \$2,380.001 Fire protection services Contributor address; City; State; Zip Code 8601 Gary Burns Drive Frisco, TX 74034 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

Candidate/Officeholder/Political Committee
Credit Card Payment OTHER (enter a category not listed above) Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/16 Rpt: 14/30 Livingston, Brian Date Payee name 06/30/2020 Anedot.com Amount (\$) Payee address; City; State; Zip Code PO Box 84314 \$234.21 Baton Rouge, LA 70884 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Fees Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Merchant Services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/11/2020 Ascension Coffee Amount (\$) Payee address; City; State; Zip Code \$11.73 3625 The Star Blvd #300 Frisco, TX 75034 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Coffee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/15/2020 City of Frisco Amount (\$) Payee address; City; State; Zip Code \$200.00 6101 Frisco Square Blvd. Frisco, TX 75034 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Fees Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Filling Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 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. FILER NAME Total pages Schedule F1: 2 Filer ID Sch: 2/16 Rpt: 15/30 Livingston, Brian Date Payee name 01/27/2020 Collin County Bookkeeping Payee address; Amount (\$) City; State; Zip Code \$50.00 11932 Salisbury Drive Suite 202 Frisco, TX 75035 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Bookkeeping and Campaign reporting Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/25/2020 Community Impact Newspaper Amount (\$) Payee address; City; State; Zip Code \$875.00 7460 Warren Pkwy Suite 160 Frisco, TX 75034 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper Ad Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/18/2020 Community Impact Newspaper Amount (\$) Payee address; State; Zip Code \$825.00 7460 Warren Pkwy Suite 160 Frisco, TX 75034 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper ad Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 3/16 Rpt: 16/30	Livingston, Brian	
4	Date	5 Payee name	
	01/20/2020	Corner Store	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$23.97	6529 Dallas Pkwy	
		Frisco, TX 75034	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Misc items	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
	Date	Payee name	
	02/07/2020	Dan Stricklin Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$400.00	856 Crystal Lake Drive	
	w 3/4 33/4 3		
		Frisco, TX 75036	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Block walking	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	03/05/2020	Dan Stricklin Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	856 Crystal Lake Drive	
		Frisco, TX 75036	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Block walking	
		Diock waiking	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
_			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manes/Contract Labor

1 Total pages Schedule F1: Sch: #16 Rpt: 17/30 Livingston, Brian 3 Filer ID Sch: #16 Rpt: 17/30 Livingston, Brian 5 Payee name EZT Texting 5 Payee address; City; State; Zip Code 1410 2nd Street Suite 200 Santa Monica, TX 90401 (b) Description COPE CAMPOITURE (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Date Date Payee name EZT Texting Amount (\$) \$25,00 Santa Monica, TX 90401 (b) Description Condition of travel outside of Texas. Complete Schedule T. Control of travel outside of Texas. Complete Schedule T. Control of the Austral TX, officialistic form gayerise Text Marketing Payee name EZT Texting Amount (\$) Payee address; City; State; Zip Code 1410 2nd Street Suite 200 Santa Monica, TX 90401 PURPOSE Campilete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Can		Conditions / Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
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Advertising Expense			Santa Monica, TX 90401
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PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
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Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH			
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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 Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 5/16 Rpt: 18/30	Livingston, Brian	
4	Date	5 Payee name	
	04/29/2020	EzTtexting	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$25.00	1410 2nd Street	
		Suite 200	
		Santa Monica, TX 90401	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
		Check if Austin, TX, officeholder living expense	
		Text Marketing	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	05/29/2020	EzTtexting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	1410 2nd Street	
		Suite 200	
		Santa Monica, TX 90401	
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	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
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	expenditure to benefit C/O	H	
	Date	Payee name	
	06/29/2020	EzTtexting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	1410 2nd Street	
		Suite 200	
		Santa Monica, TX 90401	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Text Marketing	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		
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1 Total pages Schedule F1: Sch: 6/16 Rpt: 19/30	2 FILER NAME Livingston, Brian	
4 Date	5 Payee name	-
04/01/2020	Facebook Ad Team	
6 Amount (\$) \$321.13	7 Payee address; City; State; Zip Code 1601 S. California Ave Palo Alto, CA 94304	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Facebook ads	Mangie
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/31/2020	Facebook Ad Team	
Amount (\$)	Payee address; City; State; Zip Code	
\$353.31	1601 S. California Ave	
	Palo Alto, CA 94304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Facebook ads	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/29/2020	Facebook Ad Team	
Amount (\$) \$225.42	Payee address; City; State; Zip Code 1601 S. California Ave	Angelonie
	Palo Alto, CA 94304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Facebook ad	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 7/16 Rpt: 20/30 Livingston, Brian Date Payee name 04/30/2020 Facebook Ad Team State; Zip Code Amount (\$) Payee address; City; \$104.80 1601 S. California Ave Palo Alto, CA 94304 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Facebook ad Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/31/2020 Facebook Ad Team Payee address; State; Zip Code Amount (\$) \$51.39 1601 S. California Ave Palo Alto, CA 94304 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Facebook ad Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/11/2020 First Graphic Service, Inc Amount (\$) Payee address; City; State; Zip Code \$1,238.07 229 Garvon St Garland, TX 75040 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign graphics design Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guid	le explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID
	Sch: 8/16 Rpt: 21/30	Description of the Personal Property of the Pe	Livingston, Brian			
4	Date	5	Payee name			•
	02/01/2020		First Graphic Service, Inc			
6	Amount (\$)	7	Payee address; City;	State; Zip Co	ode	
	\$562.90	MONTH NAMED AND ADDRESS OF THE PERSONS ASSESSED.	229 Garvon St			
			Garland, TX 75040			
8	PURPOSE	(a)	Category (See Categories listed at the	top of this schedule)	(b)	Description
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9	Complete ONLY if direct	Ц,	Candidate/Officeholder name	Office	labt	Office held
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sou	ayrıl	Office field
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	Date		Payee name			
	02/19/2020	L	First Graphic Service, Inc	21.1.2		
	Amount (\$)		Payee address; City;	State; Zip Co	oae	
	\$433.00		229 Garvon St			
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		L	Garland, TX 75040		_	
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	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught	Office held
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	Date	Г	Payee name			
	03/18/2020		Fletcher, Brian			
	Amount (\$)	Γ	Payee address; City;	State; Zip Co	ode	
	\$300.00		9520 Alberta Court			
			Frisco, TX 75033			
	PURPOSE	(a)	Category (See Categories listed at the	top of this schedule)	(b)	Description
	OF EXPENDITURE		Printing Expense			Check if travel outside of Texas. Complete Schedule T.
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Comn		egal Services The Instruction Guid		alaries/Wag v to com			OTHER (enter a catego	ry not listed above)
1	Total pages Schedule F1:	2 F	ILER NAME						3 Filer ID	
	Sch: 9/16 Rpt: 22/30	L	_ivingston, B	rian						
4	Date	5 F	Payee name							
	01/02/2020	F	Fletcher, Bria	เท						
6	Amount (\$)	7 F	Payee address	s; City;	State; 2	Zip Code	;			
	\$275.00	9	9520 Alberta	Court						
		F	Frisco, TX 75	5033						
8	PURPOSE	(a) (Category (See	Categories listed at the	top of this schedu	le) (k) Des	scription		
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9	Complete ONLY if direct	Ca	andidate/Office	eholder name	Offi	ce sough	nt		Office held	
3	expenditure to benefit C/O		andidate/Office	choider hame		oc ocugi			o moo rioid	
	Date		Payee name							
	01/30/2020	ı	-ayee name -letcher, Bria	an .						
					Ctata	7in Code				
	Amount (\$)	1	Payee address 9520 Alberta		State; 2	Lip Coue	=			
	\$1,000.00	٤	3520 Alberta	Court						
		F	Frisco, TX 75	5033						
	PURPOSE OF			Categories listed at the	top of this schedu	le) (k	-	scription		
	EXPENDITURE		Consulting E	xpense			_		outside of Texas. Complete S TX, officeholder living exper	1
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	Complete ONLY if direct	Ca	andidate/Offic	eholder name	Offi	ce sough	nt		Office held	
	expenditure to benefit C/OI					J				
	Date	F	Payee name							
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ere ere	Amount (\$)		Payee address	s; City;	State; 2	7in Code	<u> </u>			
	\$204.81	1	3201 Dallas							
	Q201.01	1	Suite 200-21	-						
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			Frisco, TX 75			1,,				
	PURPOSE OF			Categories listed at the	top of this schedu	le) (I		scription	outside of Texas, Complete S	Schedule T
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-	Complete ONLY if direct	Ca	andidate/Offic	eholder name	Offi	ce sough	nt		Office held	
	expenditure to benefit C/OI					J				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candiidate/Officeholder/Political Committee
Credit Cond Payment

Event Expense Loan Repa Fees Office Ove Food/Beverage Expense Polling Exp Gitt/Awards/Memorials Expense Printing Expense Salaries/M

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
_	Sch: 10/16 Rpt: 23/30	Livingston, Brian				
4	Date	5 Payee name				
	01/01/2020	Frisco FastPacs				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$153.68	124 Rose Ln				
		#603				
		Frisco, TX 75034				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Donation for ISD Weekend meals				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	H				
	Date	Payee name				
	01/03/2020	Frisco FastPacs				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$82.11	124 Rose Ln				
#603						
		Frisco, TX 75034				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee				
		Candidate/Officeholder/Political Committee				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/Ol	H				
	Date	Payee name				
	04/13/2020	GoDaddy				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$72.68					
		Scottsdale, AZ				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Campaign Website				
The state of the s		Sampaigh Woodie				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					

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

	Credit Card Payment	The Instruction Guide explains how to	comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 11/16 Rpt: 24/30	Livingston, Brian		
4	Date	5 Payee name		
	01/02/2020	Gonzales-Marines, Deyra		
6	7.7	7 Payee address; City; State; Zip	Code	
	\$75.00	4013 Castella Cv.		
		Leander, TX 78641		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Condition State of the T
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Graphics Design
9	Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held
	expenditure to benefit C/OI	H		
	Date	Payee name		
	02/03/2020	Gonzales-Marines, Deyra		
	Amount (\$)	Payee address; City; State; Zip	Code	
	\$75.00	4013 Castella Cv.		
		Leander, TX 78641		
-				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b)	Check if travel outside of Texas. Complete Schedule T.
	OF		(b)	
	OF		(b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	OF EXPENDITURE Complete ONLY if direct	Advertising Expense Candidate/Officeholder name Office s		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE	Advertising Expense Candidate/Officeholder name Office s		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE Complete ONLY if direct	Advertising Expense Candidate/Officeholder name Office s		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol	Advertising Expense Candidate/Officeholder name Office s		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol	Advertising Expense Candidate/Officeholder name Office s H Payee name	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 02/17/2020	Advertising Expense Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$)	Advertising Expense Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$)	Advertising Expense Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00	Advertising Expense Candidate/Officeholder name Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv.	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00	Advertising Expense Candidate/Officeholder name Office s H Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv. Leander, TX 78641	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00	Advertising Expense Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv. Leander, TX 78641 (a) Category (See Categories listed at the top of this schedule)	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00	Advertising Expense Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv. Leander, TX 78641 (a) Category (See Categories listed at the top of this schedule)	ought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv. Leander, TX 78641 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office s	ought Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphic Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv. Leander, TX 78641 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office s	ought Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphic Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv. Leander, TX 78641 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office s	ought Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphic Design
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/17/2020 Amount (\$) \$75.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office s Payee name Gonzales-Marines, Deyra Payee address; City; State; Zip 4013 Castella Cv. Leander, TX 78641 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office s	ought Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphics Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphic Design

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 (enter a category not listed above)

Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 12/16 Rpt: 25/30 Livingston, Brian Date Payee name Jaisinghani, Priyanka 01/31/2020 6 Amount (\$) Payee address; City; State; Zip Code \$125.00 2015 Midway Road #107 Carrollton, TX 75006 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Music Entertainment Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 04/22/2020 Livingston, Brian Payee address: State; Zip Code Amount (\$) City; \$500.00 9250 Alberta Ct Frisco, TX 75033 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Reimbursement - VFW Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 06/19/2020 Mainstream Business Solutions Payee address; City; State; Zip Code Amount (\$) \$90.00 2591 Dallas Pkwy Suite 300 Frisco, TX 75034 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **Printing Expense EXPENDITURE** Check if Austin, TX, officeholder living expense print materials Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID					
	Sch: 13/16 Rpt: 26/30		Livingston, Brian								
4	Date	5	5 Payee name								
	06/19/2020	Mainstream Business Solutions									
6	Amount (\$)	7	Payee address; City; State; Zip	Coc	le						
	\$90.00	2591 Dallas Pkwy									
			Suite 300								
			Frisco, TX 75034								
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	7	(b) Description						
	OF EXPENDITURE		Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
				-	Print materials						
					T THE THOUGH A						
9	Complete ONLY if direct		Candidate/Officeholder name Office s	soug	ht	Office held					
	expenditure to benefit C/O										
<u> </u>	Date	Γ	Payee name								
	01/01/2020		PayPal								
	Amount (\$)		Payee address; City; State; Zip	Coc	le						
	\$300.00		2211 North First Street								
			San Jose, CA 95113								
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	T	(b) Description						
OF Accounting/Banking Check if travel outside of Texas. Complete Sche											
	EXI ENDITORE			Check if Austin, TX, officeholder living expense							
		Digital Payment service									
L	Complete ONLY if direct	t Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/OI										
-	Date	Г	Payee name								
	01/18/2020		PayPal								
	Amount (\$)	<u> </u>	Payee address; City; State; Zip	Con	le						
	\$42.99		2211 North First Street								
	¥ 1=100		-								
			San Jose, CA 95113								
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF	1	Accounting/Banking		Check if travel o	utside of Texas. Complete Schedule T.					
	EXPENDITURE		3			TX, officeholder living expense					
		Digital Payment service									
_											
Na constant	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office s	soug	ht	Office held					
-	rme provided by Toyor F	11.	Commission was other state t	11.110		Vorsion V1.1	-1-1177				

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2	FILER NAME				3 Filer ID	
	Sch: 14/16 Rpt: 27/30		Livingston, Brian					
4	Date	5	Payee name					
	01/13/2020	5	Priyanka Entertain	ment, LLC				
6	Amount (\$)	7	Payee address;	City;	State; Zip	Code		
	\$125.00							
			TX					
8	PURPOSE	(a)	Category (See Catego	ries listed at the top of	f this schedule)	(b)) Description	
	OF EXPENDITURE		Event Expense	noo notou at the top of	· une contoudity		Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE						Check if Austin, TX, officeholder living expense	
							Musician	
L	Complete ONLY if direct	Ļ	Sandidata/Officabalda		Office		Office hold	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholde	er name	Office s	ougnt	Office held	
_		_						
	Date		Payee name					
	01/14/2020		Sharp, Brad					
	Amount (\$)		Payee address;	City;	State; Zip	Code		
	\$425.00							
			Frisco, TX 75034					
	PURPOSE	(a)	Category (See Catego	ries listed at the top of	f this schedule)	(b)) Description	
	OF EXPENDITURE		Event Expense			l	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
							Campaign event photography	
							, 3	
	Complete ONLY if direct		Candidate/Officeholde	er name	Office s	ought	Office held	
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	01/02/2020		Verona Villa					
<u> </u>	Amount (\$)		Payee address;	City;	State; Zip	Code		
	\$1,045.05		6591 Dallas Pkwy	,	,			
	12,01210		,					
			Frisco, TX 75034					
_	PURPOSE					I(b)) Description	
	OF	5	Category (See Catego Event Expense	ries listed at the top of	f this schedule)	(5)	Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		Evolit Expolito			1	Check if Austin, TX, officeholder living expense	
							Campaign event	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholde	er name	Office s	ought	Office held	
	experiorare to benefit C/Of	1						

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 15/16 Rpt: 28/30	FILER NAME Livingston, Brian 3 Filer ID	
4	Date 01/04/2020	Payee name Verona Villa	
6	Amount (\$) \$239.63	Payee address; City; State; Zip Code 6591 Dallas Pkwy	
8	PURPOSE OF EXPENDITURE	Frisco, TX 75034 A) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign event location	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 01/10/2020	Payee name Vista Print	
	Amount (\$) \$383.19	Payee address; City; State; Zip Code 95 Hayden Ave	
	PURPOSE OF EXPENDITURE	Lexington, MA 02421 A) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cards	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 05/27/2020	Payee name Vista Print	
	Amount (\$) \$261.55	Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421	
	PURPOSE OF EXPENDITURE	A) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cards	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	nmittee	Gift/Awards Legal Servi				ense ges/Contract Labor plete this form.		Travel Out of District OTHER (enter a category not	listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	
	Sch: 16/16 Rpt: 29/30		Livingston, I								
4	Date	5	Payee name								
	01/09/2020		Walmart								
6	Amount (\$)	7	Payee addres	ss; C	City;	State;	Zip Code	9			
	\$32.96		8555 Presto	n Rd,							
		and the same of th									
			Frisco, TX 7	'5034							
8	PURPOSE	(a)	Category (Se	e Categorie	es listed at the top	of this sche	dule) (I) Description			
	OF EXPENDITURE		Food/Bever					-		de of Texas. Complete Schedu	ile T.
	EXT ENDITORE							Territoria de la constanta de		officeholder living expense	
								Campaign	event	supplies	
9	Complete ONLY if direct expenditure to benefit C/O	Н (Candidate/Offic	ceholder	name	Of	ffice sougl	nt		Office held	
	SAPERICIO DENEIR C/OI										

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel in District Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F4: 2 FILER NAME Sch: 1/1 Rpt: 30/30 Livingston, Brian \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name Date 01/15/2020 City of Frisco Amount (\$) Payee address; City; State; Zip Code \$200.00 6101 Frisco Square Blvd. Frisco, TX 75034 TYPE OF 9 Non-Political X Political **EXPENDITURE PURPOSE** (b) Description 10 (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Filling Fee 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH